| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| DISTRICT OF MARYLAND                            | _                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | ☐ Chapter 7                     |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | ■ Chapter 13                    | Check if this an amended filing |

#### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1:                  | Identify Yourself   |  |   |
|-----|------------------------|---|--|---|
|     |                        |   | About Debtor 1:                                  | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your                   | full name   |  |   |
|     | your<br>pictui<br>exam | e the name that is on<br>government-issued<br>re identification (for<br>nple, your driver's<br>se or passport). | Natalie First name  A. Middle name               | First name  Middle name                       |
|     | identi                 | y your picture ification to your ing with the trustee.  | Tao Last name and Suffix (Sr., Jr., II, III)     | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  | used<br>Includ         | ther names you have<br>I in the last 8 years<br>de your married or<br>en names.                                 | FKA Natalie Morgan-Tao<br>FKA Natalie Morgan Tao |   |
| 3.  | your<br>numl<br>Indiv  | the last 4 digits of<br>Social Security<br>ber or federal<br>ridual Taxpayer<br>tification number               | xxx-xx-4238                                      |   |

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Debtor 1 Natalie A. Tao Case number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |
| 5. | Where you live   | 877 N. Howard St.   | If Debtor 2 lives at a different address:   |
|    |  | Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code  |
|    |  | County  | County  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                       | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |
|    |  |   |   |

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Case number (if known)

| 7.  | The chapter of the Bankruptcy Code you are   | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |                             |  |                        |  |   |                        |   |
|-----|--|---|-----------------------------|--|------------------------|--|---|------------------------|---|
|     | choosing to file under   | ☐ Chap  | oter 7                      |  |                        |  |   |                        |   |
|     |  | ☐ Chap  | oter 11                     |  |                        |  |   |                        |   |
|     |  | ☐ Chap  | oter 12                     |  |                        |  |   |                        |   |
|     |  | ■ Chap  | oter 13                     |  |                        |  |   |                        |   |
| 8.  | How you will pay the fee   | ab<br>or  | out how yo                  | entire fee when I file my p<br>u may pay. Typically, if you<br>attorney is submitting your p<br>address. | are paying             | the fee yourself,                          | you may pay with cas                          | h, cashie              | er's check, or money                      |
|     |  | ☐ Ir  | eed to pay                  | the fee in installments. If  |                        | e this option, sign                        | and attach the Applic                         | cation for             | Individuals to Pay                        |
|     |  |   | •                           | e in Installments (Official Fo<br>t my fee be waived (You m  | ,                      | t this antion only i                       | f you are filing for Cha                      | nter 7 B               | v law a judae may                         |
|     |  | bu<br>th:   | it is not requat applies to | uired to, waive your fee, and by your family size and you allocation to Have the Chapter 7               | may do s<br>e unable t | o only if your inco<br>o pay the fee in ir | me is less than 150% nstallments). If you cho | of the of<br>cose this | ficial poverty line option, you must fill |
| 9.  | Have you filed for bankruptcy within the last 8 years?   | □ No. ■ Yes.  |                             |  |                        |  |   |                        |   |
|     |  |   | District                    | District of Maryland   | When                   | 3/05/13                                    | Case number                                   | 13-13                  | 812                                       |
|     |  |   | District                    | District of Maryland   | When                   | 6/22/12                                    | Case number                                   | 12-21                  | 747                                       |
|     |  |   | District                    | See Attachment   | When                   |  | Case number                                   |                        |   |
| 10. | Are any bankruptcy   | □No   |                             |  |                        |  |   |                        |   |
|     | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ■ Yes.  |                             |  |                        |  |   |                        |   |
|     |  |   | Debtor                      | King & Queen, LLC  |                        |  | Relationship to                               | vou                    | Sole remaining<br>member                  |
|     |  |   | District                    | District of Maryland   | When                   | 2/04/18                                    | Case number, if                               |                        | 18-11484                                  |
|     |  |   | Debtor                      |  | _                      |  | Relationship to                               |                        |   |
|     |  |   | District                    |  | When                   |  | Case number, if                               |                        |   |
| 11. | Do you rent your residence?  | ■ No.   | Go to li                    | ne 12.   |                        |  |   |                        |   |
|     | residence?   | ☐ Yes.  | Has yo                      | ur landlord obtained an evic   | tion judgm             | ent against you?                           |   |                        |   |
|     |  |   |                             | No. Go to line 12.   |                        |  |   |                        |   |
|     |  |   |                             | Yes. Fill out <i>Initial Statement</i> this bankruptcy petition.   | nt About a             | n Eviction Judgm                           | ent Against You (Form                         | 101A) a                | and file it as part of                    |

Debtor 1 Natalie A. Tao

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| Deb | otor 1 Natalie A. Tao   |                    |  | Case number (if known)   |
|-----|---|--------------------|--|--|
|     |   |                    |  |  |
| Dor | t 3: Report About Any Bu  |                    | You Own as a Sole Prop                             | ania 4 a m   |
|     |   | 1511162262         | Tou Own as a Sole Prop                             | onetoi   |
| 12. | Are you a sole proprietor of any full- or part-time business?   | ■ No.              | Go to Part 4.                                      |  |
|     |   | ☐ Yes.             | Name and location of                               | business   |
|     | A sole proprietorship is a  |                    |  |  |
|     | business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                    | Name of business, if                               | any  |
|     | If you have more than one sole proprietorship, use a separate sheet and attach  |                    | Number, Street, City,                              | State & ZIP Code   |
|     | it to this petition.  |                    | Check the appropriate                              | e box to describe your business:   |
|     |   |                    |  | Business (as defined in 11 U.S.C. § 101(27A))  |
|     |   |                    | ☐ Single Asset F                                   | Real Estate (as defined in 11 U.S.C. § 101(51B))   |
|     |   |                    |  | as defined in 11 U.S.C. § 101(53A))  |
|     |   |                    |  | roker (as defined in 11 U.S.C. § 101(6))   |
|     |   |                    | ☐ None of the a                                    |  |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?                           | deadline operation | es. If you indicate that you                       | the court must know whether you are a small business debtor so that it can set appropriate are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure Chapter 11. |
|     | For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).   | ■ No.              | I am filing under Cha                              | oter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |
|     | 0.0.0.3 101(012).   |                    | Code.  |  |
|     |   | ☐ Yes.             | I am filing under Chap                             | oter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   |
| Dos | t 4: Report if You Own or   | . Uava An          | v Harandava Dranastiv as                           | Any Property That Needs Immediate Attention  |
|     | Do you own or have any  |                    | y nazardous Property or                            | Any Property That Needs infinediate Attention  |
|     | property that poses or is   | No.                |  |  |
|     | alleged to pose a threat of imminent and identifiable hazard to   | ☐ Yes.             | What is the hazard?                                |  |
|     | public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?                                      |                    | If immediate attention is needed, why is it needed |  |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?                 |                    | Where is the property?                             |  |
|     | <b>~</b> , -  |                    |  | Number, Street, City, State & Zip Code   |
|     |   |                    |  |  |
|     |   |                    |  |  |

Debtor 1 Natalie A. Tao

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-18681 Doc 1 Filed 06/26/19 Page 6 of 59

| Debtor 1 Natalie A. Tao  |                                       |            |                              | Case num  | Case number (if known)   |  |  |
|--|---------------------------------------|------------|------------------------------|---|--|--|--|
| Par  | t 6: Answer These Quest               | ions for R | eporting Purposes            |   |  |  |  |
| 16.  | What kind of debts do you have?       | 16a.       |                              | y consumer debts? Consumer debts are consumer debts are consumer debts are consumer debts." | defined in 11 U.S.C. § 101(8) as "incurred by an                                     |  |  |
|  |                                       |            | ☐ No. Go to line 16b.        |   |  |  |  |
|  |                                       |            | Yes. Go to line 17.          |   |  |  |  |
|  |                                       | 16b.       |                              | y business debts? Business debts are debinvestment or through the operation of the b        |  |  |  |
|  |                                       |            | ☐ No. Go to line 16c.        |   |  |  |  |
|  |                                       |            | ☐ Yes. Go to line 17.        |   |  |  |  |
|  |                                       | 16c.       | State the type of debts yo   | ou owe that are not consumer debts or busi  | ness debts   |  |  |
| 17.  | Are you filing under Chapter 7?       | ■ No.      | I am not filing under Chap   | oter 7. Go to line 18.  |  |  |  |
|  | Do you estimate that after any exempt | ☐ Yes.     |                              |   |  |  |  |
| Yes. Go to line 17.  |                                       |            |                              |   |  |  |  |
|  |                                       |            | ☐ Yes                        |   |  |  |  |
|  | distribution to unsecured             |            |                              |   |  |  |  |
| 18.  | How many Creditors do                 | 1-49       |                              | □ 1,000-5,000   | □ 25,001-50,000  |  |  |
|  |                                       |            | )                            | <b>5001-10,000</b>  | ☐ 50,001-100,000   |  |  |
|  | OWC:                                  | _          |                              | □ 10,001-25,000   | ☐ More than100,000   |  |  |
|  |                                       | □ 200-9    | 999                          |   |  |  |  |
| 19.  | How much do you                       |            |                              | ■ \$1,000,001 - \$10 million  | □ \$500,000,001 - \$1 billion  |  |  |
|  |                                       |            |                              |   | □ \$1,000,000,001 - \$10 billion   |  |  |
|  |                                       |            |                              |   | ☐ \$10,000,000,001 - \$50 billion  |  |  |
|  |                                       |            |                              |   |  |  |  |
| 20.  |                                       |            |                              |   | □ \$500,000,001 - \$1 billion  |  |  |
|  |                                       |            |                              |   | ☐ \$1,000,000,001 - \$10 billion<br>☐ \$10,000,000,001 - \$50 billion                |  |  |
|  |                                       | _ ` '      |                              | □ \$50,000,001 - \$100 million  | ☐ More than \$50 billion   |  |  |
|  |                                       |            |                              | ,,, <b>,</b>  |  |  |  |
| Par  | t 7: Sign Below                       |            |                              |   |  |  |  |
| For  | you                                   | I have ex  | xamined this petition, and I | declare under penalty of perjury that the in  | formation provided is true and correct.  |  |  |
|  |                                       |            |                              | er 7, I am aware that I may proceed, if eligine relief available under each chapter, and    | ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7. |  |  |
|  |                                       |            |                              | did not pay or agree to pay someone who is d the notice required by 11 U.S.C. § 342(b).     |  |  |  |
| I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. |                                       |            | specified in this petition.  |   |  |  |  |
|  |                                       |            |                              | ent, concealing property, or obtaining mone   |  |  |  |
|  |                                       | 1519, an   |                              | up to \$250,000, or imprisonment for up to 2  | 20 years, or both. 18 U.S.C. 99 152, 1341,   |  |  |
|  |                                       | /s/ Nata   | alie A. Tao                  | Signature of Del  | otor 2   |  |  |
|  |                                       |            | e of Debtor 1                | Signature of Del  | JOI 2  |  |  |
|  |                                       | Executed   | d on <b>June 26, 2019</b>    | Executed on   |  |  |  |
|  |                                       | LACCUIC    | MM / DD / YYYY               |   | MM / DD / YYYY   |  |  |
|  |                                       |            |                              |   |  |  |  |

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Debtor 1 Natalie A. Tao Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Jeffrey I                    | M. Sirody Attorney for Debtor | Date          | June 26, 2019<br>MM / DD / YYYY |
|----------------------------------|-------------------------------|---------------|---------------------------------|
| Jeffrey M. S                     | Sirody 11715                  |               |                                 |
| Jeffrey M. S                     | Sirody and Associates         |               |                                 |
| Suite 360 E                      |                               |               |                                 |
| Pikesville,<br>Number, Street, 0 | City, State & ZIP Code        |               |                                 |
| Contact phone                    | 410-415-0445                  | Email address | smeyers5@hotmail.com            |
| 11715 MD<br>Bar number & Sta     | ate                           |               |                                 |

Debtor 1 Natalie A. Tao Case number (if known)

| Fill in this infor     | mation to identify your  | case:               |           |                       |
|------------------------|--------------------------|---------------------|-----------|-----------------------|
| Debtor 1               | Natalie A. Tao           |                     |           |                       |
|                        | First Name               | Middle Name         | Last Name |                       |
| Debtor 2               |                          |                     |           |                       |
| (Spouse if, filing)    | First Name               | Middle Name         | Last Name |                       |
| United States Ba       | ankruptcy Court for the: | DISTRICT OF MARYLAN | ID        |                       |
| Case number (if known) |                          |                     |           | ☐ Check if this is an |

#### FORM 101. VOLUNTARY PETITION

#### **Prior Bankruptcy Cases Filed Attachment**

| District             | Case Number | Date Filed |
|----------------------|-------------|------------|
| District of Maryland | 13-13812    | 3/05/13    |
| District of Maryland | 12-21747    | 6/22/12    |
| District of Maryland | 11-25227    | 7/25/11    |

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|            | in this inform                              | estion to identify your                                    |   |   |             |                               |
|------------|---|--|---|---|-------------|-------------------------------|
|            | otor 1                                      | nation to identify your                                    | case:   |   |             |                               |
| Den        | otor i                                      | Natalie A. Tao First Name                                  | Middle Name   | Last Name   |             |                               |
|            | otor 2<br>use if, filing)                   | First Name   | Middle Name   | Last Name   |             |                               |
|            |   | kruptcy Court for the:                                     | DISTRICT OF MARYLAI                                       | ND  |             |                               |
|            |   | ., .,  |   |   |             |                               |
| (if kn     | se number<br>own)                           |  |   |   | _           | ck if this is an ended filing |
| Su<br>Be a | mmary of<br>s complete ar<br>mation. Fill o | nd accurate as possibut all of your schedul                | ole. If two married people es first; then complete th     | d Certain Statistical Information are filing together, both are equally responsible to information on this form. If you are filing amend the box at the top of this page. |             |                               |
| Part       | t 1: Summa                                  | rize Your Assets   |   |   |             |                               |
|            |   |  |   |   |             | assets<br>of what you own     |
| 1.         | Schedule A/<br>1a. Copy line                | <b>B: Property</b> (Official Feet 55, Total real estate, f | orm 106A/B)<br>rom Schedule A/B                           |   | \$          | 1,321,900.00                  |
|            | 1b. Copy line                               | e 62, Total personal pro                                   | perty, from Schedule A/B                                  |   | \$          | 1,903,037.00                  |
|            | 1c. Copy line                               | 63, Total of all propert                                   | y on Schedule A/B   |   | . \$        | 3,224,937.00                  |
| Part       | t 2: Summa                                  | rize Your Liabilities                                      |   |   |             |                               |
|            |   |  |   |   | Your        | liabilities                   |
|            |   |  |   |   | Amou        | unt you owe                   |
| 2.         |   |  | laims Secured by Property<br>mn A, Amount of claim, at t  | (Official Form 106D) the bottom of the last page of Part 1 of Schedule D  | . \$        | 992,323.66                    |
| 3.         |   |  | Unsecured Claims (Official 1 (priority unsecured claim    | I Form 106E/F) Is) from line 6e of <i>Schedule E/F</i>  | . \$_       | 1,000.00                      |
|            | 3b. Copy the                                | e total claims from Part                                   | 2 (nonpriority unsecured cl                               | laims) from line 6j of Schedule E/F   | . \$        | 28,577.00                     |
|            |   |  |   | Your total liabilities  | \$ \$       | 1,021,900.66                  |
| Part       | Summa                                       | rize Your Income and                                       | I Evnoncos  |   |             |                               |
|            | ,   |  |   |   |             |                               |
| 4.         |   | Your Income (Official Formbined monthly incom              |   | L   | . \$_       | 7,661.00                      |
| 5.         |   | Your Expenses (Officia onthly expenses from I              |   |   | \$          | 6,861.00                      |
| Part       | t 4: Answer                                 | These Questions for  | Administrative and Statis                                 | stical Records  |             |                               |
| 6.         | -   | • • •  | er Chapters 7, 11, or 13?<br>on this part of the form. Ch | heck this box and submit this form to the court with y  | our other   | schedules.                    |
| 7.         | ■ Yes What kind o                           | f debt do you have?  |   |   |             |                               |
|            |   |  |   | debts are those "incurred by an individual primarily fog for statistical purposes. 28 U.S.C. § 159.   | r a person  | al, family, or                |
|            | ☐ Your de                                   | ebts are not primarily                                     | consumer debts. You hav                                   | ve nothing to report on this part of the form. Check th   | nis box and | d submit this form to         |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

the court with your other schedules.

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Debtor 1 Natalie A. Tao Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,461.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following:   | Tota | l claim  |
|--|------|----------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$_  | 0.00     |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_  | 1,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_  | 0.00     |
| 9d. Student loans. (Copy line 6f.)   | \$_  | 0.00     |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_  | 0.00     |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$_ | 0.00     |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$   | 1,000.00 |

|               |                    | Ca                        | Se 19-1000          | ט ופ            | 10C 1                         | Filed 00/20/19  | Page          | . 1101:     | 39                         |        |  |
|---------------|--------------------|---------------------------|---------------------|-----------------|-------------------------------|---|---------------|-------------|----------------------------|--------|--|
| Fill          | in this inform     | nation to identify y      | our case and th     | nis filing      | j:                            |   |               |             |                            |        |  |
| Deb           | otor 1             | Natalie A. Tao            |                     |                 |                               |   |               |             |                            |        |  |
| Deh           | otor 2             | First Name                | Middle              | Name            |                               | Last Name   |               |             |                            |        |  |
| 1             | use, if filing)    | First Name                | Middle              | Name            |                               | Last Name   |               |             |                            |        |  |
| Unit          | ted States Ban     | kruptcy Court for the     | ne: DISTRICT        | OF MAR          | RYLAND                        | )   |               |             |                            |        |  |
| Cas           | se number          |                           |                     |                 |                               |   |               |             |                            |        | Check if this is an amended filing         |
| Sc<br>In ea   | chedule            |                           | ribe items. List ar |                 |                               | . If an asset fits in more tha<br>are filing together, both are |               |             |                            |        |  |
|               | space is neede     | ed, attach a separate     | sheet to this form  | . On the t      | top of ar                     | y additional pages, write you own or Have an Interest           | our name an   |             |                            |        |  |
| 1. <b>D</b> o | o you own or ha    | ve any legal or equit     | able interest in an | y residen       | nce, build                    | ding, land, or similar proper                                   | rty?          |             |                            |        |  |
|               | No. Go to Part     | 2.                        |                     |                 |                               |   |               |             |                            |        |  |
|               | Yes. Where is      | the property?             |                     |                 |                               |   |               |             |                            |        |  |
| 1.1           |                    |                           |                     | What i          | is the pr                     | operty? Check all that apply                                    |               |             |                            |        |  |
|               | 877 N. How         | vard St.                  |                     |                 | Single-f                      | amily home  | D             | o not deduc | ct secured cla             | aims o | r exemptions. Put the                      |
|               | Street address, if | available, or other descr | ption               |                 |                               | or multi-unit building ninium or cooperative                    |               |             |                            |        | on Schedule D:<br>cured by Property.       |
|               | Baltimore          | MD                        | 21201-0000          |                 | Manufa<br>Land                | ctured or mobile home   |               | urrent valu |                            |        | rrent value of the rtion you own?          |
|               | City               | State                     | ZIP Code            |                 |                               | ent property  | _             | \$383       | 3,900.00                   | _      | \$383,900.00                               |
|               |                    |                           |                     | □<br>■<br>Who h | Timesha<br>Other<br>nas an in | Rowhome terest in the property? Chec                            | (5            |             | simple, ten                |        | wnership interest<br>by the entireties, or |
|               |                    |                           |                     |                 | Debtor                        | 1 only  | <u> </u>      | ee simp     | le                         |        |  |
|               | Baltimore          | City                      |                     |                 | Debtor 2                      | •   |               |             |                            |        |  |
|               | County             |                           |                     |                 |                               | 1 and Debtor 2 only one of the debtors and anoth                | ner [         | Check i     | f this is com<br>ructions) | muni   | ty property                                |
|               |                    |                           |                     |                 |                               | tion you wish to add about t<br>ification number:               | this item, su | ıch as loca | I                          |        |  |

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| Debtor 1            | Natalie A.   | Тао           |                                 |      |   | Case  | e number (if known)  |                                       |  |
|---------------------|--|---------------|---------------------------------|------|---|---|--|---------------------------------------|--|
| 1.2 <b>If y</b>     | ou own or hav  | ve more       | than one, list h                |      | is the p  | roperty? Check all that apply   |  |                                       |  |
| 112                 | 24 Washington  | n Blvd.       |                                 |      | Single  | -family home  | Do not deduct secured cla  | ims or exemptions. Put the            |  |
| Stree               | et address, if available   | , or other de | scription                       | _    | _   | k or multi-unit building  | amount of any secured cla  | nims on Schedule D:                   |  |
|                     |  |               |                                 |      |   | minium or cooperative   | Creditors Who Have Clair   | ns Secured by Property.               |  |
|                     |  |               |                                 |      |   | •   |  |                                       |  |
|                     |  |               |                                 |      | Manufa  | actured or mobile home  | Current value of the   | Current value of the                  |  |
| Bal                 | ltimore  | MD            | 21230-0000                      |      | Land  |   | entire property?   | portion you own?                      |  |
| City                |  | State         | ZIP Code                        |      | Investr   | ment property   | \$166,700.00   | \$166,700.00                          |  |
|                     |  |               |                                 |      | Timesl  |   | Describe the nature of y   | our ownership interest                |  |
|                     |  |               |                                 |      | Other   | Rowhome   | (such as fee simple, tena  | ancy by the entireties, or            |  |
|                     |  |               |                                 | Who  | has an i  | nterest in the property? Check one  | a life estate), if known.  |                                       |  |
|                     |  |               |                                 |      | Debtor  | 1 only  | Fee simple   |                                       |  |
| Bal                 | Itimore City   |               |                                 |      | Debtor  | 2 only  |  |                                       |  |
| Cour                | nty  |               |                                 |      | Debtor  | 1 and Debtor 2 only   | — Chack if this is com   | munity property                       |  |
|                     |  |               |                                 |      | At leas   | st one of the debtors and another   | Check if this is community property (see instructions)   |                                       |  |
|                     |  |               |                                 |      |   | ation you wish to add about this iten   | n, such as local   |                                       |  |
|                     |  |               |                                 |      |   | ner KING AND QUEEN, LLC,<br>o reverts to the LLP's sole m   |  | therefore,                            |  |
| 1.3<br>115<br>Stree | ou own or have 55 Washington et address, if available et address e | n Blvd.       | scription  21230-0000  ZIP Code | What | Single- Duple> Condo  Manufa Land Investr Timesl Other has an i | oroperty? Check all that apply -family home or multi-unit building ominium or cooperative actured or mobile home ment property hare Rowhome Interest in the property? Check one | amount of any secured class Creditors Who Have Clair.  Current value of the entire property? \$190,200.00  Describe the nature of years. | Current value of the portion you own? |  |
| Ral                 | Itimore City   |               |                                 | _    |   | r 2 only  |  |                                       |  |
| Cour                |  |               |                                 |      | Debtor  | r 1 and Debtor 2 only<br>st one of the debtors and another  | Check if this is com   | munity property                       |  |
|                     |  |               |                                 |      |   | ation you wish to add about this iten<br>ntification number:  | n, such as local   |                                       |  |
|                     |  |               |                                 |      |   | ner KING AND QUEEN, LLC,<br>o reverts to the LLP's sole m   |  | therefore,                            |  |

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| Debtor            | 1 Natalie A. 7                                    | Гао          |                            |                |  | Cas   | e number (if known)   |   |
|-------------------|---|--------------|----------------------------|----------------|--|---|---|---|
| <b>If</b>         | you own or hav                                    | e more       | than one, list h           |                | ic tha nr  | operty? Check all that apply  |   |   |
| 87                | <b>'3-875 N. Howal</b> eet address, if available, |              | scription                  | _              | Single-l   | family home or multi-unit building ninium or cooperative  | Do not deduct secured cla<br>amount of any secured cla<br>Creditors Who Have Clair                          |   |
| <b>Ba</b><br>City | altimore<br>⁄                                     | MD<br>State  | <b>21201-0000</b> ZIP Code |                | Land   | nent property are Rowhome, 2 parcels by deed.   | Current value of the entire property? \$485,000.00  Describe the nature of you (such as fee simple, tender) |   |
|                   |   |              |                            | Who            | has an ir<br>Debtor                                    | nterest in the property? Check one 1 only   | a life estate), if known.  Fee simple   | ancy by the entireties, or                        |
|                   | altimore City unty                                |              |                            | prope<br>Title | At least<br>informa<br>erty ident<br>ed own<br>colved, | 2 only 1 and Debtor 2 only t one of the debtors and another ation you wish to add about this iter diffication number: er QUALITY CARE DAYCAI therefore, ownership revel | RE AT BUP, LLP, has   | been  |
| <b>If</b> 1.5     | you own or hav                                    | e more       | than one, list h           | ere:           |  | operty? Check all that apply  |   |   |
|                   | 666 Dulany St.<br>eet address, if available,      | or other des | scription                  | _<br>_<br>_    | Duplex   | family home<br>or multi-unit building<br>ninium or cooperative  | Do not deduct secured cla<br>amount of any secured cla<br>Creditors Who Have Clair                          |   |
| Ba                | altimore  | MD<br>State  | <b>21223-0000</b> ZIP Code |                | Land   | nent property   | Current value of the entire property?   | Current value of the portion you own? \$87,200.00 |
|                   |   |              |                            | -              | Other  | Rowhome  nterest in the property? Check one   | Describe the nature of yet (such as fee simple, tenda a life estate), if known.  Fee simple                 |   |
|                   | altimore City unty                                |              |                            |                | At least   | 2 only 1 and Debtor 2 only t one of the debtors and another tition you wish to add about this iter tification number:   | Check if this is com (see instructions) m, such as local  | munity property                                   |

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| Del                       | otor 1 Natalie A  | \. Tao                                    |  |            |                        | Ca   | se number   | (if known)                                      |  |
|---------------------------|---|---|--|------------|------------------------|--|-------------|---|--|
| 4.0                       | If you own or h   | ave more                                  | than one, list h   |            |                        |  |             |   |  |
| 1.6                       | 000 T 01  |   |  | What       | is the pr              | operty? Check all that apply                                 |             |   |  |
|                           | 888 Tyson St.  Street address, if available, or other description   |   |  |            | Single-f               | family home  |             |   | aims or exemptions. Put the                                  |
|                           | Street address, if availa   | scription                                 |  | Duplex     | or multi-unit building |  | •           | aims on Schedule D:<br>ans Secured by Property. |  |
|                           |   |   |  |            | Condor                 | ninium or cooperative  | Croanor     | o vivio riavo cian                              | no decarda by r reporty.                                     |
|                           |   |   |  |            | Manufa                 | ctured or mobile home  | Current     | value of the                                    | Current value of the   |
|                           | Baltimore   | MD  | 21201-0000   |            | Land                   |  |             | roperty?  | portion you own?   |
|                           | City  | State                                     | ZIP Code   |            | Investm                | nent property  |             | \$8,900.00                                      | \$8,900.00   |
|                           |   |   |  |            | Timesh                 |  | Docarib     | o the noture of w                               | our ownership interest                                       |
|                           |   |   |  |            | Other                  | Rowhome  |             |   | our ownership interest<br>ancy by the entireties, or         |
|                           |   |   |  | Who        | has an in              | nterest in the property? Check one                           |             | tate), if known.                                |  |
|                           |   |   |  |            | Debtor                 | 1 only   | Fee si      | mple  |  |
|                           | Baltimore City  |   |  |            | Debtor                 | 2 only   |             |   |  |
|                           | County  |   |  |            |                        | 1 and Debtor 2 only  | □ Che       | eck if this is com                              | munity property  |
|                           |   |   |  |            | At least               | one of the debtors and another                               |             | instructions)                                   |  |
|                           |   |   |  |            |                        | tion you wish to add about this it                           | em, such as | local   |  |
|                           |   |   |  |            | -                      | tification number:   |             |   |  |
|                           |   |   |  | Unii       | mprove                 | ed lot0151 acres   |             |   |  |
| 3. <b>(</b> 4. <b>V</b> E | you own, lease, or eone else drives. If Cars, vans, trucks,  No Yes | have legal<br>you lease a<br>tractors, sp | vehicle, also repondence of the control of the cont | es, moto   | Schedule<br>orcycles   | cles, whether they are registed G: Executory Contracts and G | Unexpired L | eases.  | rehicles you own that  |
| 5 .                       | Add the dollar valu   | tached for I                              | Part 2. Write that   |            |                        | ries from Part 2, including a                                |             |   | \$0.00   |
|                           | you own or have a   |   | Household Items  | st in an   | of the                 | following items?   |             |   | Current value of the   |
| 50                        | you own or nave a   | any logal of                              | oquitable ilitele:   | ot iii ali | y or tile              | ionowing items:  |             |   | portion you own? Do not deduct secured claims or exemptions. |
| [                         | <b>lousehold goods a</b><br>Examples: Major ap<br>☑ No<br>■         | pliances, fu                              |  | na, kitch  | enware                 |  |             |   |  |
|                           | Yes. Describe   |   |  |            |                        |  |             |   |  |
|                           |   | living                                    |  | ıps, en    | d table                | nings, bed room set, kitch<br>s, coffee table, kitchenwa     |             |   | \$800.00   |

| Debtor 1                   | Natalie A. Tao  | Case number (  | if known)                                |
|----------------------------|---|--|--|
| 7. Electro Examp           |   | stereo, and digital equipment; computers, printers, scanners<br>a players, games             | ; music collections; electronic devices  |
| ■ Yes                      | . Describe  |  |  |
|                            |   | orinter, cell phone, watch, alarm clock, radio, asher, microwave, toaster, washer/dryer, etc | \$200.00                                 |
| Examp ■ No                 | other collections, memorabilia, collect                                       | ts, or other artwork; books, pictures, or other art objects; sta<br>ibles                    | ump, coin, or baseball card collections; |
| ☐ Yes                      | . Describe  |  |  |
| Examp  ■ No                | musical instruments   | her hobby equipment; bicycles, pool tables, golf clubs, skis                                 | ; canoes and kayaks; carpentry tools;    |
| ☐ Yes                      | . Describe  |  |  |
| 10. Firear                 | r <b>ms</b><br>nples: Pistols, rifles, shotguns, ammunition,                  | and related equipment  |  |
| ■ No                       | . Describe  |  |  |
| 11. Clothe<br>Exam<br>□ No | es<br>nples: Everyday clothes, furs, leather coats,                           | , designer wear, shoes, accessories  |  |
| ■ Yes                      | . Describe  |  |  |
|                            |   | hiing & shoe aparrel, boots, t-shirts, shirts, ans, shorts, coats, jackets, hats, socks,     | \$200.00                                 |
| ☐ No                       |   | engagement rings, wedding rings, heirloom jewelry, watches                                   | , gems, gold, silver                     |
|                            | Miscellaneous junk  | costume jewlery  | \$200.00                                 |
| Exam<br>■ No<br>□ Yes      | arm animals nples: Dogs, cats, birds, horses . Describe                       |  |  |
| ■ No                       | ther personal and household items you  Give specific information              | did not already list, including any health aids you did n                                    | ot list                                  |
|                            | the dollar value of all of your entries fro<br>Part 3. Write that number here | om Part 3, including any entries for pages you have atta                                     | \$1,400.00                               |
| Part 4: Do                 | escribe Your Financial Assets   |  |  |
| Do you o                   | wn or have any local or equitable intere                                      | ct in any of the following?  | Current value of the                     |

Official Form 106A/B Schedule A/B: Property page 5

portion you own?
Do not deduct secured claims or exemptions.

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| Debtor 1  | Natalie A. Tao   | Case number (if known)                           |                          |
|---|--|--|--------------------------|
| ☐ No  | mples: Money you have in your wallet, in your home, in a safe deposit box, and   | on hand when you file your petitior              | n                        |
|   |  | Cash   | \$50.00                  |
|   | psits of money  mples: Checking, savings, or other financial accounts; certificates of deposit; sh  institutions. If you have multiple accounts with the same institution, list e  |  | ouses, and other similar |
|   | s Institution name:  |  |                          |
|   | ds, mutual funds, or publicly traded stocks<br>mples: Bond funds, investment accounts with brokerage firms, money market an  | ccounts  |                          |
|   | s Institution or issuer name:  |  |                          |
| and<br>□ No   | publicly traded stock and interests in incorporated and unincorporated bu joint venture  s. Give specific information about them  Name of entity:  | usinesses, including an interest % of ownership: | in an LLC, partnership,  |
|   | King & Queen, LLC<br>Real estate holding company, currently<br>dissolved and defunct   | %  | \$1.00                   |
|   | Quality Care Daycare at BUP, LLP- defunct an dissolved   | d 100 %  | \$1.00                   |
|   | 205 East 17th Street, LLC  | %  | \$277.00                 |
|   | 2500 Bedford Ave., LLC   | %  | \$4,922.00               |
|   | 91 East 21st St., LLC  | %  | \$762.00                 |
|   | TLG Properties, LLC owns only a 2006 BMW 525 i, 180000   |  | \$1,000.00               |
|   | Self Employed Realtor- Sole Proprietor   | %  | \$1.00                   |
| Nego<br>Non-<br>■ No<br>□ Yes<br>21. <b>Retir</b> o | ernment and corporate bonds and other negotiable and non-negotiable institute instruments include personal checks, cashiers' checks, promissory noted in negotiable instruments are those you cannot transfer to someone by signing or someone by signing or someone by signing or leave the specific information about them a leave the same in leave to pension accounts in leave the specific information accounts in leave the same in leave to the same in le | s, and money orders. delivering them.            | lans                     |
| ■ No  | s. List each account separately.   |  |                          |
|   | Type of account: Institution name:   |  |                          |

Official Form 106A/B Schedule A/B: Property page 6 Case 19-18681 Doc 1 Filed 06/26/19 Page 17 of 59

| De  | ebtor 1        | Natalie A. Tao  | Case number (if known)                           |  |
|-----|----------------|---|--|--|
| 22. | Your s         | by deposits and prepayments  thare of all unused deposits you have made so that you may continuous. Agreements with landlords, prepaid rent, public utilities (election)    |  | , or others  |
|     |                |   | me or individual:                                |  |
| 23. | Annuit<br>■ No | ies (A contract for a periodic payment of money to you, either for I  | ife or for a number of years)                    |  |
|     | ☐ Yes          | Issuer name and description.  |  |  |
| 24. |                | s in an education IRA, in an account in a qualified ABLE prog<br>C. §§ 530(b)(1), 529A(b), and 529(b)(1).   | ram, or under a qualified state tuition progra   | ım.  |
|     | Yes            | Institution name and description. Separately file the   | records of any interests.11 U.S.C. § 521(c):     |  |
| 25. | Trusts         | equitable or future interests in property (other than anything  | listed in line 1), and rights or powers exercise | sable for your benefit   |
|     |                | Give specific information about them  |  |  |
|     | Examp<br>■ No  | s, copyrights, trademarks, trade secrets, and other intellectua<br>les: Internet domain names, websites, proceeds from royalties an<br>Give specific information about them |  |  |
|     | Examp<br>■ No  | es, franchises, and other general intangibles bles: Building permits, exclusive licenses, cooperative association   | holdings, liquor licenses, professional licenses |  |
|     | ⊔ Yes.         | Give specific information about them  |  |  |
| M   | oney or        | property owed to you?   |  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|     | ■ No           | unds owed to you  |  |  |
|     | ☐ Yes.         | Give specific information about them, including whether you alread  | dy filed the returns and the tax years           |  |
|     | Examp<br>■ No  | support  oles: Past due or lump sum alimony, spousal support, child suppor  Give specific information   | t, maintenance, divorce settlement, property set | ttlement   |
|     | Examp          | amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benef benefits; unpaid loans you made to someone else                                | iits, sick pay, vacation pay, workers' compensa  | tion, Social Security  |
|     |                | Give specific information   |  |  |
| 31. |                | ts in insurance policies<br>bles: Health, disability, or life insurance; health savings account (H  | SA); credit, homeowner's, or renter's insurance  |  |
|     | _              | Name the insurance company of each policy and list its value.<br>Company name:  | Beneficiary:                                     | Surrender or refund value:   |
| 32. | If you a       | erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life instance has died.                           |  | property because   |
|     | П Удс          | Give specific information   |  |  |

Debtor 1 Case number (if known) Natalie A. Tao 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Yes. Describe each claim....... MVA 2/14/19 (Motor Vehicle Accident) Lost wages = Approx. \$10,000.00 \$25,000.00 Pain and suffering Unpaid breach of lease judgments debtor is attempting to \$300,000.00 collect MVA 3/8/19 Lost wages = Approx. \$10,000.00 \$25,000.00 Pain and suffering MVA 10/8/2017 \$25,000.00 Pain and suffering MVA 4/4/2017 \$25,000.00 Pain and suffering MVA 12/22/2015 \$25,000.00 pain and suffering PI Claim re: IVC Filter class action claim for pain and \$250,000.00 suffering PI Claim v. Xerolto, class action claim for pain and suffering \$350,000.00 MVA 6/3/2016 \$25,000.00 pain and suffering MVA 6/5/19 \$25,000.00 pain and suffering 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ No Yes. Describe each claim....... Potential fraud claims v. Lakeside National, LLC and titling \$250,000.00 issues in the handling of its mortgage lien Potential fraud claims v. SFC, LLC and titling issues in the \$250,000.00 handling of its mortgage lien \$9,623.00 Claim v. Greenwood towing

| Debtor 1          | Natalie A. Tao   | Case number (if known)  |                |
|-------------------|--|---|----------------|
|                   |  |   |                |
|                   |  | Claim v. LIBERTY MUTUAL INS COMP unpaid PIP   | \$10,000.00    |
|                   |  |   |                |
|                   |  | Declaratory Judgment action (Quiet Title Action) v. PBS, Investments, fka SFC, LLC v. Lakeside National, LLC v. |                |
|                   |  | Precision Contracting   | \$250,000.00   |
|                   |  |   |                |
|                   |  | Possible claims versus the following entities:  |                |
|                   |  | Baltimore city Mayor and City Council Russell Frost   |                |
|                   |  | Estate of Rex Frost   |                |
|                   |  | Marion Frost  |                |
|                   |  | Baltimore County Government   |                |
|                   |  | State Farm  |                |
|                   |  | Geico   |                |
|                   |  | Liberty mutual insurance United Healthcare  |                |
|                   |  | Montgomery county government  |                |
|                   |  | All former tenants of the Debtor  | \$50,000.00    |
|                   |  | our entries from Part 4, including any entries for pages you have attached lere                                 | \$1,901,637.00 |
| Part 5: De        | escribe Any Business-Related                                     | Property You Own or Have an Interest In. List any real estate in Part 1.  |                |
| 37. <b>Do you</b> | own or have any legal or equi                                    | table interest in any business-related property?  |                |
| ■ No. G           | 6o to Part 6.  |   |                |
| ☐ Yes.            | Go to line 38.   |   |                |
|                   | escribe Any Farm- and Commo<br>you own or have an interest in fa | ercial Fishing-Related Property You Own or Have an Interest In. armland, list it in Part 1.                     |                |
| _                 | ou own or have any legal o                                       | r equitable interest in any farm- or commercial fishing-related property?                                       |                |
| ☐ Ye              | es. Go to line 47.   |   |                |
| Part 7:           | Describe All Property You  | Own or Have an Interest in That You Did Not List Above  |                |
|                   | ou have other property of a nples: Season tickets, country       | ny kind you did not already list?<br>ry club membership   |                |
|                   | . Give specific information                                      |   |                |
| 54. <b>Add</b>    | the dollar value of all of y                                     | our entries from Part 7. Write that number here   | \$0.00         |

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| Deb  | ntor 1 Natalie A. Tao  |   |                | Case number (if known)       |                |
|------|--|---|----------------|------------------------------|----------------|
| Part | 8: List the Totals of Each Part of this Form                 |   |                |                              |                |
| 55.  | Part 1: Total real estate, line 2                            |   |                |                              | \$1,321,900.00 |
| 56.  | Part 2: Total vehicles, line 5                               | _ | \$0.00         |                              |                |
| 57.  | Part 3: Total personal and household items, line 15          |   | \$1,400.00     |                              |                |
| 58.  | Part 4: Total financial assets, line 36                      |   | \$1,901,637.00 |                              |                |
| 59.  | Part 5: Total business-related property, line 45             |   | \$0.00         |                              |                |
| 60.  | Part 6: Total farm- and fishing-related property, line 52    |   | \$0.00         |                              |                |
| 61.  | Part 7: Total other property not listed, line 54             | + | \$0.00         |                              |                |
| 62.  | Total personal property. Add lines 56 through 61             | - | \$1,903,037.00 | Copy personal property total | \$1,903,037.00 |
| 63.  | Total of all property on Schedule A/B. Add line 55 + line 62 |   |                |                              | \$3,224,937.00 |

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|                                  | 0400 10 1  | 10001 2001  |                            | 1 4 5 5 7 5 1 4 5 5 7 6 5 7 6 5 6 5 6 5 6 5 6 5 6 6 6 6  | . 00  |
|----------------------------------|--|---|----------------------------|--|---|
| FII                              | I in this information to identify your case:   |   |                            |  |   |
| De                               | ebtor 1 Natalie A. Tao   |   |                            |  | ]   |
|                                  | First Name   | Middle Name   | L                          | ast Name   |   |
|                                  | ebtor 2 ouse if, filling) First Name   | Middle Name   | L                          | ast Name   |   |
| Un                               | nited States Bankruptcy Court for the: DIS   | TRICT OF MARYLAND   |                            |  |   |
| _                                | ase number   |   |                            |  | ☐ Check if this is an amended filing  |
|                                  | fficial Form 106C<br>chedule C: The Prope  | erty You Cla  | aim                        | as Exempt  | 4/19  |
| the<br>nee                       | as complete and accurate as possible. If two property you listed on <i>Schedule A/B: Propere</i> ded, fill out and attach to this page as many discase number (if known).  | ty (Official Form 106A/B  | as y                       | our source, list the property that you   | claim as exempt. If more space is   |
| spe<br>any<br>iun<br>exe<br>to t | reach item of property you claim as exempled if the collar amount as exempt. Alternative applicable statutory limit. Some exemptions—may be unlimited in dollar amount. Hemption to a particular dollar amount and the applicable statutory amount.  Int 1: Identify the Property You Claim as | ely, you may claim the ons—such as those fo owever, if you claim at the value of the proper | full fa<br>r heal<br>n exe | iir market value of the property be<br>Ith aids, rights to receive certain b<br>mption of 100% of fair market valu | ing exempted up to the amount of<br>penefits, and tax-exempt retirement<br>ae under a law that limits the |
| 1                                | Which set of exemptions are you claimin  | ng? Check one only eve  | en if vi                   | our spouse is filing with you  |   |
| •                                | _  |   | •                          | ,  |   |
|                                  | <ul><li>■ You are claiming state and federal nonbate</li><li>□ You are claiming federal exemptions. 1</li></ul>  | . , .   | 11 U.                      | S.C. § 522(D)(3)   |   |
| _                                |  | 3 ( )( )  |                            | Cities the testament to a halour   |   |
| 2.                               | For any property you list on Schedule A/   | •   | • •                        |  | 0 - 20 - 10 - 10 - 10 - 10 - 10 - 10 - 1  |
|                                  | Brief description of the property and line on<br>Schedule A/B that lists this property   | Current value of the<br>portion you own   | Am                         | ount of the exemption you claim  | Specific laws that allow exemption  |
|                                  |  | Copy the value from<br>Schedule A/B   | Che                        | eck only one box for each exemption.   |   |
|                                  | 877 N. Howard St. Baltimore, MD 21201 Baltimore City County  | \$383,900.00  |                            | \$1.00   | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(f)(1)(i)(2)  |
|                                  | Line from Schedule A/B: 1.1  |   |                            | 100% of fair market value, up to any applicable statutory limit  | 7100. 9 11-304(1)(1)(1)(2)  |
|                                  | 1124 Washington Blvd. Baltimore,<br>MD 21230 Baltimore City County   | \$166,700.00  |                            | \$1.00   | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(f)(1)(i)(1)  |
|                                  | Titled owner KING AND QUEEN, LLC has been dissolved, therefore, ownership reverts to the LLP's sole member, the Debtor. Line from Schedule A/B: 1.2  |   |                            | 100% of fair market value, up to any applicable statutory limit  | 1100. § 11 30-(1)(1)(1)   |
|                                  | 1155 Washington Blvd. Baltimore,<br>MD 21230 Baltimore City County   | \$190,200.00  |                            | \$1.00   | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(f)(1)(i)(1)  |
|                                  | Titled owner KING AND QUEEN, LLC has been dissolved, therefore,  | - <del></del>   |                            | 100% of fair market value, up to any applicable statutory limit  | 1100. 3 11-304(1)(1)(1)(1)  |

has been dissolved, therefore, ownership reverts to the LLP's sole

member, the Debtor. Line from Schedule A/B: 1.3

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| Debtor 1                            | Natalie A. Tao  |                                      |     | Case number (if known)  |  |
|-------------------------------------|---|--------------------------------------|-----|---|--|
|                                     | description of the property and line on edule A/B that lists this property  | Current value of the portion you own | Amo | ount of the exemption you claim                                 | Specific laws that allow exemption                       |
|                                     |   | Copy the value from<br>Schedule A/B  | Che | ck only one box for each exemption.                             |  |
|                                     | -875 N. Howard St. Baltimore, MD<br>01 Baltimore City County  | \$485,000.00                         |     | \$1.00  | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)          |
| Title<br>DA'<br>diss<br>reve<br>the | or Datamore Gray County ed owner QUALITY CARE //CARE AT BUP, LLP, has been solved, therefore, ownership erts to the LLP's sole member, Debtor. from Schedule A/B: 1.4 |                                      |     | 100% of fair market value, up to any applicable statutory limit | 1100. 3 11-30-(0)(0)                                     |
|                                     | 6 Dulany St. Baltimore, MD 21223  | \$87,200.00                          |     | \$1.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(b)(5)       |
| Title<br>has<br>owr<br>mer          | ed owner KING AND QUEEN, LLC,<br>been dissolved, therefore,<br>nership reverts to the LLC's sole<br>mber, the Debtor.<br>from Schedule A/B: 1.5                       |                                      |     | 100% of fair market value, up to any applicable statutory limit |  |
|                                     | Tyson St. Baltimore, MD 21201<br>timore City County   | \$8,900.00                           |     | \$1.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(b)(5)       |
| Uni                                 | mproved lot0151 acres<br>from Schedule A/B: 1.6   |                                      |     | 100% of fair market value, up to any applicable statutory limit | 1100. 3 11 00-(0)(0)                                     |
|                                     | cellaneous goods and<br>hishings, bed room set, kitchen   | \$800.00                             |     | \$800.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(b)(4)       |
| set,<br>tabl<br>line                | living room set, lamps, end es, coffee table, kitchenware, ns, bedding, sofa, chairs, etc from Schedule A/B: 6.1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |  |
|                                     | /'s, Computer, printer, cell phone,<br>ch, alarm clock, radio,  | \$200.00                             |     | \$200.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(f)(1)(i)(1) |
| refr<br>toas                        | igerator, dishwasher, microwave, ster, washer/dryer, etc from Schedule A/B: 7.1   |                                      |     | 100% of fair market value, up to any applicable statutory limit |  |
|                                     | cellaneous clothiing & shoe<br>rrel, boots, t-shirts, shirts,   | \$200.00                             |     | \$200.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(b)(4)       |
| swe<br>jack<br>etc.                 | eaters, pants, jeans, shorts, coats, tets, hats, socks, undergarments,  |                                      |     | 100% of fair market value, up to any applicable statutory limit |  |
|                                     | cellaneous junk costume jewlery   | \$200.00                             |     | \$200.00  | Md. Code Ann., Cts. & Jud.                               |
| Line                                | from Schedule A/B: 12.1   |                                      |     | 100% of fair market value, up to any applicable statutory limit | Proc. § 11-504(f)(1)(i)(1)                               |
| <b>Cas</b><br>Line                  | h<br>from Schedule A/B: <b>16.1</b>   | \$50.00                              |     | \$50.00   | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(f)(1)(i)(1) |
| 0                                   | · · · · · · · · · · · · · · · · · · ·   |                                      |     | 100% of fair market value, up to any applicable statutory limit | C CA NAT   |
|                                     | g & Queen, LLC<br>Il estate holding company,  | \$1.00                               |     | \$1.00  | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(f)(1)(i)(1) |
| cur<br>100                          | rently dissolved and defunct % ownership from Schedule A/B: 19.1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |  |

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| Natalie A. Tao  Brief description of the property and line on                          | Current value of the                 | Λm  | Case number (if known)  | Specific laws that allow exemption                    |
|--|--------------------------------------|-----|---|---|
| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own |     | ount of the exemption you claim                                 | Specific laws that allow exemption                    |
|  | Copy the value from<br>Schedule A/B  | Cne | eck only one box for each exemption.                            |   |
| Quality Care Daycare at BUP, LLP-<br>defunct and dissolved                             | \$1.00                               |     | \$1.00  | Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1) |
| 100 % ownership  |                                      |     | 100% of fair market value, up to                                | 1100.3 11 00-(1)(1)(1)(1)                             |
| Line from Schedule A/B: 19.2   |                                      |     | any applicable statutory limit                                  |   |
| TLG Properties, LLC  | \$1,000.00                           |     | \$543.00  | Md. Code Ann., Cts. & Jud.                            |
| owns only a 2006 BMW 525 i, 180000<br>100 % ownership                                  |                                      |     | 100% of fair market value, up to                                | Proc. § 11-504(b)(5)                                  |
| Line from Schedule A/B: 19.6   |                                      |     | any applicable statutory limit                                  |   |
| MVA 2/14/19  | \$25,000.00                          |     | \$25,000.00   | Md. Code Ann., Cts. & Jud.                            |
| (Motor Vehicle Accident)<br>Lost wages = Approx. \$10,000.00                           |                                      |     | 100% of fair market value, up to                                | Proc. § 11-504(b)(2)                                  |
| Pain and suffering Line from Schedule A/B: 33.1  |                                      | _   | any applicable statutory limit                                  |   |
| MVA 2/14/19  | ¢25,000,00                           |     | \$4,546.00  | Md. Code Ann., Cts. & Jud                             |
| (Motor Vehicle Accident)   | \$25,000.00                          |     | \$4,540.00  | Proc. § 11-504(f)(1)(i)(1)                            |
| Lost wages = Approx. \$10,000.00 Pain and suffering                                    |                                      |     | 100% of fair market value, up to any applicable statutory limit |   |
| Line from Schedule A/B: <b>33.1</b>  |                                      |     | , - <sub>F</sub> F  |   |
| MVA 2/14/19  | \$25,000.00                          |     | \$5,454.00  | Md. Code Ann., Cts. & Jud.                            |
| Motor Vehicle Accident) ost wages = Approx. \$10,000.00                                |                                      |     | 100% of fair market value, up to                                | Proc. § 11-504(b)(5)                                  |
| Pain and suffering   |                                      | _   | any applicable statutory limit                                  |   |
| Line from Schedule A/B: 33.1   |                                      |     | , , ,   |   |
| MVA 3/8/19   | \$25,000.00                          |     | \$25,000.00   | Md. Code Ann., Cts. & Jud.                            |
| Lost wages = Approx. \$10,000.00 Pain and suffering                                    |                                      |     | 100% of fair market value, up to                                | Proc. § 11-504(b)(2)                                  |
| Line from Schedule A/B: 33.3   |                                      |     | any applicable statutory limit                                  |   |
| MVA 10/8/2017  | \$25,000.00                          |     | \$25,000.00   | Md. Code Ann., Cts. & Jud.                            |
| Pain and suffering   |                                      |     | 100% of fair market value, up to                                | Proc. § 11-504(b)(2)                                  |
| Line from Schedule A/B: 33.4   |                                      |     | any applicable statutory limit                                  |   |
| MVA 4/4/2017<br>Pain and suffering   | \$25,000.00                          |     | \$25,000.00   | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(b)(2)    |
| Line from Schedule A/B: 33.5   |                                      |     | 100% of fair market value, up to                                | 1 100. 3 11-304(n)(2)                                 |
|  |                                      |     | any applicable statutory limit                                  |   |
| MVA 12/22/2015   | \$25,000.00                          |     | \$25,000.00   | Md. Code Ann., Cts. & Jud.                            |
| pain and suffering Line from Schedule A/B: 33.6  |                                      |     | 100% of fair market value, up to                                | Proc. § 11-504(b)(2)                                  |
|  |                                      | _   | any applicable statutory limit                                  |   |
| PI Claim re: IVC Filter class action   | \$250,000.00                         |     | \$250,000.00  | Md. Code Ann., Cts. & Jud.                            |
| claim for pain and suffering Line from Schedule A/B: 33.7                              |                                      |     | 100% of fair market value, up to                                | Proc. § 11-504(b)(2)                                  |
|  |                                      |     | any applicable statutory limit                                  |   |
| PI Claim v. Xerolto, class action  | \$350,000.00                         |     | \$350,000.00  | Md. Code Ann., Cts. & Jud.                            |
| claim for pain and suffering Line from Schedule A/B: 33.8                              |                                      |     | 100% of fair market value, up to                                | Proc. § 11-504(b)(2)                                  |
|  |                                      |     | any applicable statutory limit                                  |   |

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| Debtor   | Natalie A. Tao  |                                      |        | Case number (if known)  |  |  |
|--|---|--------------------------------------|--------|---|--|--|
| Brief description of the property and line on<br>Schedule A/B that lists this property |   | Current value of the portion you own | Am     | Specific laws that allow exemption                              |  |  |
|  |   | Copy the value from<br>Schedule A/B  | Che    | eck only one box for each exemption.                            |  |  |
|  | VA 6/3/2016<br>ain and suffering  | \$25,000.00                          |        | \$25,000.00   | Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(2)    |  |
| -  | ne from Schedule A/B: 33.9  |                                      |        | 100% of fair market value, up to any applicable statutory limit | F100. § 11-304(b)(2)                               |  |
|  | VA 6/5/19<br>ain and suffering  | \$25,000.00                          |        | \$25,000.00   | Md. Code Ann., Cts. & Jud.<br>Proc. § 11-504(b)(2) |  |
| •  | ne from Schedule A/B: 33.10   |                                      |        | 100% of fair market value, up to any applicable statutory limit | 1100. 3 11 004(0)(2)                               |  |
|  | re you claiming a homestead exemption subject to adjustment on 4/01/22 and every No Yes. Did you acquire the property covery No Yes | y 3 years after that for c           | ases f | ·   | ,  |  |

|                                 | Case   | e 19-10001 DOCT Filed  | 100/20/       | 19 Page 25   | 01 59  |                          |
|---------------------------------|--|--|---------------|--|--|--------------------------|
| Fill in this infor              | mation to identify you                               | ır case:   |               |  |  |                          |
| Debtor 1                        | Natalie A. Tao                                       |  |               |  |  |                          |
|                                 | First Name   | Middle Name Last   | t Name        |  |  |                          |
| Debtor 2<br>(Spouse if, filing) | First Name   | Middle Name Lasi   | t Name        |  |  |                          |
|                                 |  |  | t Name        |  |  |                          |
| United States Ba                | inkruptcy Court for the:                             | DISTRICT OF MARYLAND   |               |  |  |                          |
| Case number                     |  |  |               |  |  |                          |
| (if known)                      |  |  |               |  |  | if this is an            |
|                                 |  |  |               |  | amen   | ded filing               |
| Official Forr                   | n 106D   |  |               |  |  |                          |
|                                 |  | Who Have Claims Sec  | cured         | hy Propert   | V  | 12/15                    |
|                                 |  | two married people are filing together, bot  |               | <u> </u>   |  |                          |
|                                 |  | number the entries, and attach it to this for  |               |  |  |                          |
| 1. Do any creditors             | have claims secured by                               | your property?   |               |  |  |                          |
| ☐ No. Chec                      | k this box and submit t                              | his form to the court with your other scho   | edules. You   | u have nothing else                                    | to report on this form.                      |                          |
| Yes. Fill in                    | n all of the information                             | below.   |               |  |  |                          |
| Part 1: List A                  | II Secured Claims                                    |  |               |  |  |                          |
| 2. List all secured             | claims. If a creditor has m                          | nore than one secured claim, list the creditor se  | eparately for | Column A   | Column B                                     | Column C                 |
|                                 |  | articular claim, list the other creditors in Part 2. er according to the creditor's name.  | . As much     | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 City of Ba                  |  | Describe the property that secures the cla   | aim:          | \$25,000.00  | \$485,000.00                                 | \$25,000.00              |
| Rm. 1, At                       | e<br>elliday Street<br>tn: Bankruptcy<br>e, MD 21202 | 873-875 N. Howard St. Baltimore MD 21201 Baltimore City Count Titled owner QUALITY CARE DAYCARE AT BUP, LLP, has bed dissolved, therefore, ownership reverts to the LLP's sole member the Debtor.  As of the date you file, the claim is: Check apply.  Contingent | en<br>er,     |  |  |                          |
|                                 | t, City, State & Zip Code                            | ■ Unliquidated   |               |  |  |                          |
| Number, Stree                   | , Oily, State & Zip Code                             | ■ Disputed   |               |  |  |                          |
| Who owes the de                 | ebt? Check one.                                      | Nature of lien. Check all that apply.  |               |  |  |                          |
| ■ Debtor 1 only □ Debtor 2 only |  | An agreement you made (such as mortgated car loan)   | age or secure | ed   |  |                          |
| Debtor 1 and De                 | ebtor 2 only   | ☐ Statutory lien (such as tax lien, mechanic   | 's lien)      |  |  |                          |
|                                 | he debtors and another                               | ☐ Judgment lien from a lawsuit   |               |  |  |                          |
| Check if this cl                |  | Other (including a right to offset)  | ter/Sewer     | bill   |  |                          |
| Date debt was inc               | urred  | Last 4 digits of account number  | 4238          |  |  |                          |

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| Debtor 1 Natalie A. Tao   |   | Case number (if known) |              |             |  |  |  |
|---|---|------------------------|--------------|-------------|--|--|--|
| First Name Middle N   | Name Last Name  |                        |              |             |  |  |  |
| 2.2 FNA DZ, LLC FBO WSFS  | Describe the property that secures the claim:   | \$47,000.00            | \$485,000.00 | \$47,000.00 |  |  |  |
| c/o James Truitt<br>20 E. Timonium Rd., #<br>101<br>Lutherville Timonium,<br>MD 21093 | 873-875 N. Howard St. Baltimore, MD 21201 Baltimore City County Titled owner QUALITY CARE DAYCARE AT BUP, LLP, has been dissolved, therefore, ownership reverts to the LLP's sole member, the Debtor.  As of the date you file, the claim is: Check all that apply.             |                        |              |             |  |  |  |
| Number, Street, City, State & Zip Code  | ☐ Contingent ■ Unliquidated   |                        |              |             |  |  |  |
| Who owes the debt? Check one.   | Disputed  Nature of lien. Check all that apply.   |                        |              |             |  |  |  |
| ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only                          | <ul> <li>☐ An agreement you made (such as mortgage or s car loan)</li> <li>☐ Statutory lien (such as tax lien, mechanic's lien)</li> </ul>  | secured                |              |             |  |  |  |
| ☐ At least one of the debtors and another   | ☐ Judgment lien from a lawsuit  |                        |              |             |  |  |  |
| ☐ Check if this claim relates to a community debt                                     | Other (including a right to offset) Tax Sale  | Lien                   |              |             |  |  |  |
| Date debt was incurred  | Last 4 digits of account number 423   | 8                      |              |             |  |  |  |
| 2.3 Lakeside National LLC   | Describe the property that secures the claim:   | \$496,823.00           | \$485,000.00 | \$11,823.00 |  |  |  |
| Creditor's Name  1 N. Marlyn Ave. Essex, MD 21221                                     | 873-875 N. Howard St. Baltimore, MD 21201 Baltimore City County Titled owner QUALITY CARE DAYCARE AT BUP, LLP, has been dissolved, therefore, ownership reverts to the LLP's sole member, the Debtor.  As of the date you file, the claim is: Check all that apply.  Contingent |                        |              |             |  |  |  |
| Number, Street, City, State & Zip Code  | ■ Unliquidated  |                        |              |             |  |  |  |
| Who owes the debt? Check one.   | ■ Disputed  Nature of lien. Check all that apply.  □ An agreement you made (such as mortgage or s   | cogurad                |              |             |  |  |  |
| ■ Debtor 1 only □ Debtor 2 only   | car loan)   | secureu                |              |             |  |  |  |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien)  |                        |              |             |  |  |  |
| ☐ At least one of the debtors and another   | ☐ Judgment lien from a lawsuit  |                        |              |             |  |  |  |
| ☐ Check if this claim relates to a community debt                                     | Other (including a right to offset)  Mortgage   | e                      |              |             |  |  |  |
| Date debt was incurred  | Last 4 digits of account number 423   | 8                      |              |             |  |  |  |

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| Debtor 1 Natalie A. Tao                           |   | Case number (if known) |              |        |
|---|---|------------------------|--------------|--------|
| First Name Middle N                               | lame Last Name  |                        |              |        |
| 2.4 Lakeside National LLC                         | Describe the property that secures the claim:   | \$120,488.66           | \$610,000.00 | \$0.00 |
| Creditor's Name                                   | 877 N. Howard St. & 888 Tyson St.<br>Baltimore, MD 21201, 2nd lien IDOT<br>v. 873-875 N. Howard St., Baltimore,<br>MD 21201 |                        |              |        |
| 1 N. Marlyn Ave.<br>Essex, MD 21221               | As of the date you file, the claim is: Check all that apply.  Contingent  | _                      |              |        |
| Number, Street, City, State & Zip Code            | Unliquidated  |                        |              |        |
| Who owes the debt? Check one.                     | ■ Disputed Nature of lien. Check all that apply.  |                        |              |        |
| ■ Debtor 1 only □ Debtor 2 only                   | An agreement you made (such as mortgage or car loan)  | secured                |              |        |
| Debtor 1 and Debtor 2 only                        | Statutory lien (such as tax lien, mechanic's lien)  | )                      |              |        |
| At least one of the debtors and another           | Judgment lien from a lawsuit  |                        |              |        |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Mortgag   | ge                     |              |        |
| Date debt was incurred                            | Last 4 digits of account number 423   | 38                     |              |        |
| 2.5 MD PLC, LLC                                   | Describe the property that secures the claim:   | \$3,000.00             | \$383,900.00 | \$0.00 |
| Creditor's Name                                   | 877 N. Howard St. Baltimore, MD<br>21201 Baltimore City County  |                        |              |        |
| 11 Warren Rd.<br>Cockeysville, MD 21030           | As of the date you file, the claim is: Check all that apply.  | _                      |              |        |
|   | Contingent  |                        |              |        |
| Number, Street, City, State & Zip Code            | Unliquidated  |                        |              |        |
| Who owes the debt? Check one.                     | ■ Disputed Nature of lien. Check all that apply.  |                        |              |        |
| ■ Debtor 1 only □ Debtor 2 only                   | An agreement you made (such as mortgage or car loan)  | secured                |              |        |
| ☐ Debtor 1 and Debtor 2 only                      | ☐ Statutory lien (such as tax lien, mechanic's lien)  | )                      |              |        |
| ☐ At least one of the debtors and another         | ☐ Judgment lien from a lawsuit  |                        |              |        |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset)  Tax Sale   | e Lien                 |              |        |
| Date debt was incurred                            | Last 4 digits of account number 423   | 38                     |              |        |

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| Debtor 1 Natalie A. Tao  |  | Case number (if known) |              |        |
|--|--|------------------------|--------------|--------|
| First Name Middle N  | lame Last Name   |                        |              |        |
| 2.6 MDCVA Properties LLC                                       | Describe the property that secures the claim:  | \$22,512.00            | \$190,200.00 | \$0.00 |
| 35 Fulford Avenue, Suite<br>203<br>Bel Air, MD 21014           | 1155 Washington Blvd. Baltimore, MD 21230 Baltimore City County Titled owner KING AND QUEEN, LLC, has been dissolved, therefore, ownership reverts to the LLP's sole member, the Debtor.  As of the date you file, the claim is: Check all that apply.  Contingent |                        |              |        |
| Number, Street, City, State & Zip Code                         | Unliquidated   |                        |              |        |
| Who owes the debt? Check one.  ■ Debtor 1 only □ Debtor 2 only | ■ Disputed  Nature of lien. Check all that apply.  □ An agreement you made (such as mortgage or sale car loan)   | secured                |              |        |
| Debtor 1 and Debtor 2 only                                     | ☐ Statutory lien (such as tax lien, mechanic's lien)   |                        |              |        |
| ☐ At least one of the debtors and another                      | ☐ Judgment lien from a lawsuit   |                        |              |        |
| ☐ Check if this claim relates to a community debt              | Other (including a right to offset)  Tax Sale  | Lien                   |              |        |
| Date debt was incurred   | Last 4 digits of account number 423  | 8                      |              |        |
| 2.7 PBS Investments, LLC                                       | Describe the property that secures the claim:  | \$250,000.00           | \$444,100.00 | \$0.00 |
| Creditor's Name  | 1124 & 1155 Washington Blvd., Baltimore, MD 21230 & 2666 Dulany St., Baltimore MD 21223 Titled owner KING AND QUEEN, LLC, has been dissolved, therefore, ownership reverts to the LLP's sole member, the Debtor.   |                        |              |        |
| 3909 Sweetbriar Lane<br>Frederick, MD 21704                    | As of the date you file, the claim is: Check all that apply.  Contingent   | 1                      |              |        |
| Number, Street, City, State & Zip Code                         | ■ Unliquidated   |                        |              |        |
| Number, Street, City, State & Zip Code                         | `  |                        |              |        |
| Who owes the debt? Check one.                                  | ■ Disputed  Nature of lien. Check all that apply.  |                        |              |        |
| ■ Debtor 1 only □ Debtor 2 only                                | ☐ An agreement you made (such as mortgage or s car loan)   | secured                |              |        |
| Debtor 1 and Debtor 2 only                                     | ☐ Statutory lien (such as tax lien, mechanic's lien)   |                        |              |        |
| $\square$ At least one of the debtors and another              | ☐ Judgment lien from a lawsuit   |                        |              |        |
| ☐ Check if this claim relates to a community debt              | Other (including a right to offset)  Mortgag   | e/cross collateralized |              |        |
| Date debt was incurred   | Last 4 digits of account number 423  | 8                      |              |        |

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| Debt  | tor 1 Natalie A.                        | Tao                  |  | C              | Case number (if known)            |                           |                |
|-------|---|----------------------|--|----------------|-----------------------------------|---------------------------|----------------|
|       | First Name                              | Middle N             | lame Last Name                                 |                | •                                 |                           |                |
|       | Brasisian Can                           | tracting 0           |  |                |                                   |                           |                |
| 2.8   | Precision Con<br>Dev. Corp              | tracting &           | Describe the property that secures the         | claim:         | \$25,000.00                       | \$610,000.00              | \$0.00         |
|       | Creditor's Name                         |                      | 877 N. Howard St. & 888 Tysor                  |                |                                   | <u> </u>                  |                |
|       |   |                      | Baltimore, MD 21201 Debtor                     |                |                                   |                           |                |
|       |   |                      | this off but not released                      | -              |                                   |                           |                |
|       | 800 McKean A                            | VA                   | As of the date you file, the claim is: Che     | ck all that    |                                   |                           |                |
|       | Baltimore, MD                           |                      | apply.  Contingent                             |                |                                   |                           |                |
|       | ·                                       |                      | _  |                |                                   |                           |                |
|       | Number, Street, City, S                 | State & ZIP Code     | Unliquidated                                   |                |                                   |                           |                |
| \A/ba | owes the debt?                          | Shoole and           | Disputed                                       |                |                                   |                           |                |
| _     |   | neck one.            | Nature of lien. Check all that apply.          |                |                                   |                           |                |
|       | ebtor 1 only                            |                      | ☐ An agreement you made (such as mor car loan) | tgage or secu  | urea                              |                           |                |
|       | ebtor 2 only                            |                      |  |                |                                   |                           |                |
| _     | ebtor 1 and Debtor 2                    | •                    | Statutory lien (such as tax lien, mechai       | nic's lien)    |                                   |                           |                |
|       | t least one of the deb                  |                      | ☐ Judgment lien from a lawsuit                 | acond Mo       | ortgage/cross-collater            | alizad                    |                |
|       | heck if this claim re<br>community debt | elates to a          | Other (including a right to offset)            | econd wid      | ortgage/cross-conater             | alizeu                    |                |
|       |   |                      |  |                |                                   |                           |                |
|       |   | Ballooned            |  |                |                                   |                           |                |
|       | 1.14                                    | on May 1,            | Lord Billion Committee                         | 4238           |                                   |                           |                |
| Date  | debt was incurred                       | 2009                 | Last 4 digits of account number                | 7230           |                                   |                           |                |
|       | l =                                     |                      |  |                | 40 500 00                         | <b>A</b>                  | 40.00          |
| 2.9   | Tax Properties  Creditor's Name         | s One, LLC           | Describe the property that secures the         |                | \$2,500.00                        | \$8,900.00                | \$0.00         |
|       | Creditor's Name                         |                      | 888 Tyson St. Baltimore, MD 2                  | 1201           |                                   |                           |                |
|       | c/o Pessin Kat                          |                      | Baltimore City County Unimproved lot0151 acres |                |                                   |                           |                |
|       | 901 Dulaney V                           | alley Rd.,           | As of the date you file, the claim is: Che     | ck all that    |                                   |                           |                |
|       | Ste. 500                                | 4004                 | apply.   |                |                                   |                           |                |
|       | Towson, MD 2                            | 1204                 | Contingent                                     |                |                                   |                           |                |
|       | Number, Street, City, S                 | State & Zip Code     | Unliquidated                                   |                |                                   |                           |                |
|       |   |                      | Disputed                                       |                |                                   |                           |                |
| Who   | owes the debt?                          | check one.           | Nature of lien. Check all that apply.          |                |                                   |                           |                |
| ■ D   | ebtor 1 only                            |                      | An agreement you made (such as mor             | tgage or secu  | ured                              |                           |                |
| ☐ D   | ebtor 2 only                            |                      | car loan)                                      |                |                                   |                           |                |
| □ D   | ebtor 1 and Debtor 2                    | only                 | ☐ Statutory lien (such as tax lien, mechai     | nic's lien)    |                                   |                           |                |
|       | t least one of the deb                  | tors and another     | ☐ Judgment lien from a lawsuit                 |                |                                   |                           |                |
|       | heck if this claim re                   | lates to a           | Other (including a right to offset)            | ax Sale Li     | ien                               |                           |                |
| C     | community debt                          |                      |  |                |                                   |                           |                |
| Date  | debt was incurred                       |                      | Last 4 digits of account number                | 4238           |                                   |                           |                |
|       |   |                      |  |                |                                   |                           |                |
|       |   |                      |  |                |                                   |                           |                |
| Add   | d the dollar value of                   | your entries in C    | olumn A on this page. Write that number I      | nere:          | \$992,323.6                       | 6                         |                |
|       |   |                      | the dollar value totals from all pages.        |                | \$992,323.6                       | 6                         |                |
| Wr    | ite that number here                    | e:                   |  |                | 4002,02010                        |                           |                |
| Part  | 2: List Others t                        | o Be Notified fo     | or a Debt That You Already Listed              |                |                                   |                           |                |
| Use t | this page only if you                   | have others to be    | e notified about your bankruptcy for a deb     | t that you al  | ready listed in Part 1. For ex    | ample, if a collection ag | ency is trying |
| to co | llect from you for a                    | debt you owe to s    | someone else, list the creditor in Part 1, ar  | nd then list t | the collection agency here. S     | imilarly, if you have mor | e than one     |
|       | tor for any of the de                   |                      | d in Part 1, list the additional creditors her | e. If you do   | not have additional persons       | to be notified for any de | bts in Part 1, |
|       | ot an out or subillit                   | ans page.            |  |                |                                   |                           |                |
|       | Name, Number, St                        | treet, City, State & | Zip Code                                       | On which       | ch line in Part 1 did you enter t | he creditor? 2.5          |                |
|       | Andrew Gary                             |                      |  | 2              |                                   |                           |                |
|       | 2450 Eutaw P                            |                      |  | Last 4 d       | digits of account number          |                           |                |
|       | Raltimore MD                            | J 2727/              |  |                |                                   |                           |                |

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

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| Debte | or 1 Natalie A. Ta   | 10                          |           | Case number (if known)   |  |  |  |  |
|-------|--|-----------------------------|-----------|--|--|--|--|--|
|       | First Name   | Middle Name                 | Last Name |  |  |  |  |  |
|       | Name, Number, Stree<br>Huesman, Jone<br>Executive Plaza<br>11350 McCormid<br>Hunt Valley, MD | a III, Suite 300<br>ck Road |           | On which line in Part 1 did you enter the creditor?                                  |  |  |  |  |
|       | Name, Number, Stree<br>Lakeside Nation<br>54 Windemere F<br>Phoenix, MD 21                   | Parkway                     |           | On which line in Part 1 did you enter the creditor?  Last 4 digits of account number |  |  |  |  |

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|                                    | Case   | 19-10001 DOC   | i illed oc   | 120/19                   | 1 age 31 of                                      | 39   |  |
|------------------------------------|--|--|--|--------------------------|--|--|--|
| Fill in this inf                   | ormation to identify your  | case:  |  |                          |  |  |  |
| Debtor 1                           | Natalie A. Tao   |  |  |                          |  |  |  |
|                                    | First Name   | Middle Name  | Last Nam   | е                        |  |  |  |
| Debtor 2                           |  |  |  |                          |  |  |  |
| (Spouse if, filing)                | First Name   | Middle Name  | Last Nam   | е                        |  |  |  |
| United States                      | Bankruptcy Court for the:  | DISTRICT OF MARYL  | AND  |                          |  |  |  |
| Case number                        |  |  |  |                          |  |  |  |
| (if known)                         |  |  |  |                          |  | ☐ Check                                    | if this is an                          |
|                                    |  |  |  |                          |  | amend                                      | led filing                             |
| 00000                              | 400E/E   |  |  |                          |  |  |  |
|                                    | rm 106E/F  |  |  |                          |  |  | _                                      |
| <u>Schedule</u>                    | E/F: Creditors W   | ho Have Unsec  | ured Claim   | S                        |  |  | 12/15                                  |
| Schedule G: Exe<br>D: Creditors Wh | ontracts or unexpired leases t<br>scutory Contracts and Unexpired<br>o Have Claims Secured by Pro<br>Page to this page. If you have<br>n). | red Leases (Official Form operty. If more space is ne            | 106G). Do not included the community of the community of the contract of the community of t | le any cred<br>you need, | itors with partially sed fill it out, number the | cured claims that are entries in the boxes | listed in Schedule on the left. Attach |
| Part 1: Lis                        | t All of Your PRIORITY Un  | secured Claims   |  |                          |  |  |  |
| 1. Do any cree                     | ditors have priority unsecured   | claims against you?  |  |                          |  |  |  |
| ☐ No. Go t                         | o Part 2.  |  |  |                          |  |  |  |
| Yes.                               |  |  |  |                          |  |  |  |
| identify wha<br>possible, list     | our priority unsecured claims. t type of claim it is. If a claim hat the claims in alphabetical orde an one creditor holds a particula     | s both priority and nonpriority<br>r according to the creditor's | y amounts, list that cl<br>name. If you have mo  | aim here ar              | nd show both priority an                         | d nonpriority amounts                      | . As much as                           |
| (For an expl                       | anation of each type of claim, se  | ee the instructions for this fo                                  | rm in the instruction I  | oooklet.)                | Total claim                                      | Priority amount                            | Nonpriority amount                     |
| 2.1 Com                            | otroller of Maryland   | Last 4 digits  | of account number  | 4238                     | \$1,000.00                                       | \$1,000.00                                 | _                                      |
|                                    | Creditor's Name  |  |  |                          |  | <u> </u>                                   |  |
|                                    | nue Admins Division  | When was the   | e debt incurred?   |                          |  |  |  |
|                                    | Carroll St.<br>polis, MD 21411   |  |  |                          |  |  |  |
|                                    | r Street City State Zip Code   | As of the date   | e you file, the claim  | is: Check a              | II that apply                                    |  |  |
| Who incu                           | rred the debt? Check one.  | ☐ Contingen  | t  |                          |  |  |  |
| ■ Debtor                           | 1 only   | ☐ Unliquidate  | ed   |                          |  |  |  |
| ☐ Debtor                           | 2 only   | Disputed   |  |                          |  |  |  |
| ☐ Debtor                           | 1 and Debtor 2 only  | Type of PRIO   | RITY unsecured cla   | im:                      |  |  |  |
| _                                  | t one of the debtors and another   | Domestic s   | support obligations  |                          |  |  |  |
| _                                  | if this claim is for a commun  | _  | certain other debts y  | ou owe the               | government                                       |  |  |
|                                    | m subject to offset?   | _  | death or personal inj  |                          | •  |  |  |
| ■ No                               | 500,000 10 0110011   | ☐ Other. Spe   | ' '  | . , yo                   |  |  |  |
| ☐ Yes                              |  | □ Otilei. Spe  | Income Ta  | xes owe                  | d  |  |  |

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| Debtor 1 Natalie A. Tao                                       |   | Case number (if known)                  |             |           |
|---|---|---|-------------|-----------|
| 2.2 Internal Revenue Service                                  | Last 4 digits of account number   | \$0.00                                  | \$0.00      | \$0.0     |
| Priority Creditor's Name PO Box 7346                          | When was the debt incurred?   |   |             |           |
| Philadelphia, PA 19101-734  Number Street City State Zip Code |   | e. Chack all that apply                 |             |           |
| Who incurred the debt? Check one.                             | As of the date you file, the claim i  Contingent  | <b>s.</b> Спеск ан тат арру             |             |           |
| ■ Debtor 1 only   | _   |   |             |           |
|   | ☐ Unliquidated  |   |             |           |
| Debtor 2 only   | Disputed  |   |             |           |
| Debtor 1 and Debtor 2 only                                    | Type of PRIORITY unsecured clai   | m:                                      |             |           |
| At least one of the debtors and another                       | Domestic support obligations  |   |             |           |
| ☐ Check if this claim is for a commu                          | <u> </u>  | · ·                                     |             |           |
| Is the claim subject to offset?                               | ☐ Claims for death or personal inju   | iry while you were intoxicated          |             |           |
| ■ No<br>□ Yes   | Other. Specify  | Purposes Only                           |             |           |
| □ Yes   | FOI NOTICE  | Fulposes Only                           |             |           |
| Part 2: List All of Your NONPRIORIT                           | Y Unsecured Claims  |   |             |           |
| . Do any creditors have nonpriority unsec                     | ured claims against you?  |   |             |           |
| □ No. You have nothing to report in this p                    | art. Submit this form to the court with your other so   | hadulas                                 |             |           |
| No. You have nothing to report in this p                      | art. Submit this form to the court with your other se   | incudies.                               |             |           |
| Yes.  |   |   |             |           |
|   | aims in the alphabetical order of the creditor will<br>laim. For each claim listed, identify what type of cla |   |             |           |
|   | er creditors in Part 3.lf you have more than three r  |   |             |           |
|   |   |   | Total clair | m         |
| Brandon Lee Jackson   | Last 4 digits of account number   | er _238                                 |             | \$1,350.0 |
| Nonpriority Creditor's Name                                   | When was the debt incurred?   |   |             |           |
| 11800 Elderberry Dr.<br>Capitol Heights, MD 20743             | when was the debt incurred?   |   |             |           |
| Number Street City State Zip Code                             | As of the date you file, the clair  | m is: Check all that apply              |             |           |
| Who incurred the debt? Check one.                             | ☐ Contingent  |   |             |           |
| ■ Debtor 1 only   | ☐ Unliquidated  |   |             |           |
| Debtor 2 only   | ☐ Disputed  |   |             |           |
| ☐ Debtor 1 and Debtor 2 only                                  | Type of NONPRIORITY unsecu  | red claim:                              |             |           |
| ☐ At least one of the debtors and and                         |   |   |             |           |
| ☐ Check if this claim is for a com                            |   | eparation agreement or divorce that you | did not     |           |
| Is the claim subject to offset?                               | report as priority claims   | paration agreement or divorce that you  | aid fiot    |           |
| ■ No  | ☐ Debts to pension or profit-sha  | aring plans, and other similar debts    |             |           |
| Yes   | ■ Other. Specify Unpaid D   | Debt                                    |             |           |
|   | _ Guier. Speeding   |   |             |           |
| 4.2 Credit Service Company                                    | Last 4 digits of account numbe  | er 3799                                 |             | \$707.00  |
| Nonpriority Creditor's Name                                   |   |   | -           | Ψίσιιο    |
| Attn: Bankruptcy  | When was the debt incurred?   | Opened 01/16                            |             |           |
| Po Box 1120   |   |   |             |           |
| Colorado Springs, CO 8090  Number Street City State Zip Code  | As of the date you file, the clair  | m is: Check all that apply              |             |           |
| Who incurred the debt? Check one.                             | _   | ,                                       |             |           |
| ■ Debtor 1 only   | ☐ Contingent  |   |             |           |
| Debtor 2 only   | ☐ Unliquidated  |   |             |           |
| Debtor 1 and Debtor 2 only                                    | Disputed  | wad alaim.                              |             |           |
| ☐ At least one of the debtors and and                         | Type of NONPRIORITY unsecu  | rea ciaim:                              |             |           |
| ☐ Check if this claim is for a com                            | - ctadent loans   |   |             |           |
| Is the claim subject to offset?                               | report as priority claims   | eparation agreement or divorce that you | did not     |           |
| ■ No  | ☐ Debts to pension or profit-sha  | aring plans, and other similar debts    |             |           |
|   |   | on Attorney South Sound Inpa            | atient      |           |
| ☐ Yes   | Other. Specify Physicia   |   |             |           |

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| Debto | Natalie A. Tao  | Case number (if known)  |             |
|-------|---|---|-------------|
| 4.3   | EZPass  | Last 4 digits of account number 4238  | \$4,000.00  |
|       | Nonpriority Creditor's Name PO Box 5100 Politimore MD 24224                   | When was the debt incurred?   |             |
|       | Number Street City State Zip Code   | As of the date you file, the claim is: Check all that apply   |             |
|       | Who incurred the debt? Check one.   | ☐ Contingent  |             |
|       | ■ Debtor 1 only   | ☐ Unliquidated  |             |
|       | Debtor 2 only   | Disputed  |             |
|       | ☐ Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured claim:  |             |
|       | ☐ At least one of the debtors and another                                     | ☐ Student loans   |             |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|       | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|       | Yes   | ■ Other. Specify Unpaid Toll and Penalty  |             |
| 4.4   | Freeman and Sons  | Last 4 digits of account number 238   | \$3,000.00  |
|       | Nonpriority Creditor's Name 5808 Folgate Ct Capitol Heights, MD 20743         | When was the debt incurred?   |             |
|       | Number Street City State Zip Code   | As of the date you file, the claim is: Check all that apply   |             |
|       | Who incurred the debt? Check one.   | Пол   |             |
|       | Debtor 1 only   | ☐ Contingent  |             |
|       | Debtor 2 only   | Unliquidated  |             |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |             |
|       | ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured claim:  |             |
|       | ☐ Check if this claim is for a community debt                                 | ☐ Student loans   |             |
|       | Is the claim subject to offset?   | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
|       | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|       | Yes   | Other. Specify Attorney fees/costs  |             |
| 4.5   | Transworld Sys Inc/33   | Last 4 digits of account number 7196  | \$520.00    |
|       | Nonpriority Creditor's Name   | <u> </u>  | <del></del> |
|       | Attn: Compliance Dept Po Box 15618  | When was the debt incurred? Opened 11/13  |             |
|       | Wilmington, DE 19850  Number Street City State Zip Code                       | As of the date you file, the claim is: Check all that apply   |             |
|       | Who incurred the debt? Check one.   | As of the date you me, the dain is. Oneon an that apply   |             |
|       | ■ Debtor 1 only   | ☐ Contingent  |             |
|       |   | ☐ Unliquidated  |             |
|       | Debtor 2 only   | ☐ Disputed  |             |
|       | Debtor 1 and Debtor 2 only  | Type of NONPRIORITY unsecured claim:  |             |
|       | At least one of the debtors and another                                       | ☐ Student loans   |             |
|       | ☐ Check if this claim is for a community debt                                 | Obligations arising out of a separation agreement or divorce that you did not                             |             |
|       | Is the claim subject to offset?   | report as priority claims   |             |
|       | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
|       | Yes   | ■ Other. Specify Collection Attorney Emc Emergency Physicians   |             |

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| Debtor   | 1 Nat    | talie A.   | . Tao  |   | Case no                     | umber (if   | known)                      |                             |  |  |
|--|----------|------------|--|---|-----------------------------|-------------|-----------------------------|-----------------------------|--|--|
|  |          | a Morg     |  | Last 4 digits of account number   | er 238                      |             |                             | \$19,000.00                 |  |  |
|  | 1062     | E 43rd     |  | When was the debt incurred?   | When was the debt incurred? |             |                             |                             |  |  |
| Brooklyn, NY 11210  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only |          |            |  | As of the date you file, the clai   | m is: Check                 | all that ap | pply                        |                             |  |  |
|  |          |            |  | ☐ Contingent  |                             |             |                             |                             |  |  |
|  |          |            |  | ☐ Unliquidated  |                             |             |                             |                             |  |  |
|  |          |            |  | ☐ Disputed  |                             |             |                             |                             |  |  |
|  | ☐ Deb    | otor 1 and | Debtor 2 only                                      | Type of NONPRIORITY unsecu  | ıred claim:                 |             |                             |                             |  |  |
|  | ☐ At le  | east one   | of the debtors and another                         | ☐ Student loans   |                             |             |                             |                             |  |  |
|  |          |            | s claim is for a community deb<br>bject to offset? | Obligations arising out of a sereport as priority claims  | eparation ag                | reement o   | or divorce that you did not |                             |  |  |
|  | ■ No     |            |  | Debts to pension or profit-sha  | aring plans, a              | and other   | similar debts               |                             |  |  |
|  | ☐ Yes    | ;          |  | ■ Other. Specify Unpaid p   | personal                    | loan (u     | nsecured(                   | _                           |  |  |
| Part 3:  | List     | t Others   | s to Be Notified About a De                        | ot That You Already Listed  |                             |             |                             |                             |  |  |
| trying more t  | to colle | ct from    | you for a debt you owe to some                     | out your bankruptcy, for a debt that<br>one else, list the original creditor in<br>sted in Parts 1 or 2, list the addition<br>page. | Parts 1 or 2                | then lis    | t the collection agency he  | ere. Similarly, if you have |  |  |
| Name an  |          |            |  | On which entry in Part 1 or Part 2 did y  | ou list the o               | riginal cre | ditor?                      |                             |  |  |
|  |          |            |  | Line <b>2.2</b> of ( <i>Check one</i> ):  | Part 1:                     | Creditors   | with Priority Unsecured Cla | aims                        |  |  |
| 31 Hop<br>Baltim   |          |            | Room 1150  | ☐ Part 2: Creditors with Nonpriority Unsecured Claims   |                             |             |                             | d Claims                    |  |  |
| Daitiiii   | .o.c,    | 11D Z 12   |  | Last 4 digits of account number   |                             |             |                             |                             |  |  |
| Name an  | nd Addre | ess        |  | On which entry in Part 1 or Part 2 did y  |                             | •           |                             |                             |  |  |
| MVA  | ):tabia  | . Usani    |  | Line 4.3 of (Check one):  |                             |             | with Priority Unsecured Cla |                             |  |  |
| 6601 R<br>Glen B   |          |            |  |   | Part 2:                     | Creditors   | with Nonpriority Unsecured  | d Claims                    |  |  |
| 0.0 2  | Jui 1110 | ,          |  | Last 4 digits of account number   |                             |             |                             |                             |  |  |
| Name an  | nd Addre | ess        |  | On which entry in Part 1 or Part 2 did y  | ou list the o               | riginal cre | ditor?                      |                             |  |  |
| State of   |          | -          |  | Line <b>2.1</b> of ( <i>Check one):</i>   | Part 1:                     | Creditors   | with Priority Unsecured Cla | aims                        |  |  |
|  |          |            | Treasury<br>reet, Room 410                         |   | Part 2:                     | Creditors   | with Nonpriority Unsecured  | d Claims                    |  |  |
| Baltim   |          |            |  |   |                             |             |                             |                             |  |  |
|  | ,        |            |  | Last 4 digits of account number   |                             |             |                             |                             |  |  |
| Name an  | nd Addre | ess        |  | On which entry in Part 1 or Part 2 did y  |                             |             |                             |                             |  |  |
| State of   |          |            | _  | Line 2.1 of (Check one):  | Part 1:                     | Creditors   | with Priority Unsecured Cla | aims                        |  |  |
|  |          |            | Treasury<br>reet, Room 410                         |   | Part 2:                     | Creditors   | with Nonpriority Unsecured  | d Claims                    |  |  |
| Baltim   |          |            |  |   |                             |             |                             |                             |  |  |
|  | ,        |            |  | Last 4 digits of account number   |                             |             |                             |                             |  |  |
| Name an  | nd Addre | ess        |  | On which entry in Part 1 or Part 2 did y  | ou list the o               | riginal cre | ditor?                      |                             |  |  |
| State of   |          |            |  | Line 4.3 of (Check one):  | Part 1:                     | Creditors   | with Priority Unsecured Cla | aims                        |  |  |
| Centra   |          |            |  |   | Part 2:                     | Creditors   | with Nonpriority Unsecured  | d Claims                    |  |  |
| Baltim   |          |            | ., Rm. 407   |   |                             |             |                             |                             |  |  |
| Daitiiii   | iore, i  | 110 212    |  | Last 4 digits of account number   |                             |             |                             |                             |  |  |
|  |          |            |  |   |                             |             |                             |                             |  |  |
| Part 4:  | Add      | the Ar     | mounts for Each Type of Ur                         | secured Claim   |                             |             |                             |                             |  |  |
|  | he amo   |            | certain types of unsecured clair                   | ns. This information is for statistical   | reporting p                 | urposes     | only. 28 U.S.C. §159. Add   | I the amounts for each type |  |  |
|  |          |            |  |   |                             |             | Total Claim                 |                             |  |  |
| <b>-</b>   |          | 6a.        | Domestic support obligations                       |   | 6a.                         | \$          | 0.0                         | <u>0</u>                    |  |  |
| Total cla  |          | 6b.        | Taxes and certain other debts                      | you owe the government  | 6b.                         | \$          | 1,000.0                     | 0                           |  |  |
|  |          | 6c.        |  | njury while you were intoxicated  | 6c.                         | \$          | 0.0                         |                             |  |  |
|  |          | 6d.        | Other. Add all other priority uns                  | ecured claims. Write that amount here   | . 6d.                       | \$          | 0.0                         |                             |  |  |

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| Debtor 1 N   | atalie A. | Тао  | Case nu  | mber (if | known)      |
|--------------|-----------|--|----------|----------|-------------|
|              | 6e.       | Total Priority. Add lines 6a through 6d.   | 6e.      | \$       | 1,000.00    |
|              |           |  |          |          | Total Claim |
|              | 6f.       | Student loans  | 6f.      | \$       | 0.00        |
| Total claims | 0-        | Obligations spiriture and of a supportion amount of the discount of the discou |          |          |             |
| from Part 2  | 6g.       | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | u<br>6g. | \$       | 0.00        |
|              | 6h.       | Debts to pension or profit-sharing plans, and other similar debts  | 6h.      | \$       | 0.00        |
|              | 6i.       | Other. Add all other nonpriority unsecured claims. Write that amount here  | e. 6i.   | \$       | 28,577.00   |
|              | o:        | Total Magnesianite, Add lines Of the control   | C:       | _        | 00.555      |
|              | 6j.       | Total Nonpriority. Add lines 6f through 6i.  | 6j.      | \$       | 28,577.00   |

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| Fill in this information to identify your case: |                |                      |           |  |
|---|----------------|----------------------|-----------|--|
| Debtor 1  | Natalie A. Tao |                      |           |  |
|   | First Name     | Middle Name          | Last Name |  |
| Debtor 2  |                |                      |           |  |
| (Spouse if, filing)                             | First Name     | Middle Name          | Last Name |  |
| United States Bankruptcy Court for the:         |                | DISTRICT OF MARYLAND |           |  |
| Case number                                     |                |                      |           |  |
| (if known)                                      |                |                      |           |  |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

2.1 Natalie Tao 10 Commercial leases, Debtor as Landlord 877 N. Howard St. Baltimore, MD 21201

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| Fill in this in                                | nformation to identify you  | r case:   |   |   |  |
|--|---|---|---|---|--|
| Debtor 1                                       | Natalie A. Tao  |   |   |   |  |
| Dahtar 0                                       | First Name  | Middle Name   | Last Name   |   |  |
| Debtor 2<br>(Spouse if, filing)                | ) First Name  | Middle Name   | Last Name   |   |  |
| United State                                   | s Bankruptcy Court for the:   | DISTRICT OF MARYLA  | AND   |   |  |
| Case numbe                                     | er  |   |   |   | ☐ Check if this is an amended filing   |
|  | Form 106H<br>ale H: Your Cod  | lebtors   |   |   | 12/15  |
| people are fi<br>ill it out, and<br>our name a | ling together, both are eq<br>d number the entries in the<br>nd case number (if known | ually responsible for sup<br>e boxes on the left. Attac<br>). Answer every question | plying correct informa<br>h the Additional Page<br>ı. | tion. If more space is<br>to this page. On the to                                     | rate as possible. If two married<br>needed, copy the Additional Page,<br>op of any Additional Pages, write     |
| 1. Do yo                                       | ou have any codebtors? (If  | you are filing a joint case,  | do not list either spouse                             | e as a codebtor.  |  |
| ■ No<br>□ Yes                                  |   |   |   |   |  |
|  | n the last 8 years, have yo<br>California, Idaho, Louisiana                           |   |   |   | rty states and territories include<br>.)   |
|  | Go to line 3.<br>Did your spouse, former spo  | ouse, or legal equivalent liv   | e with you at the time?                               |   |  |
| in line 2<br>Form 10                           | ? again as a codebtor only  | if that person is a guarar  | ntor or cosigner. Make                                | sure you have listed  | ng with you. List the person showr<br>the creditor on Schedule D (Officia<br>), Schedule E/F, or Schedule G to |
|  | olumn 1: Your codebtor<br>me, Number, Street, City, State and 2                       | ZIP Code  |   | Column 2: The cr<br>Check all schedul   | editor to whom you owe the debt es that apply:   |
| 3.1  |   |   |   | ☐ Schedule D, lir   | ne   |
|  | ame   |   |   | ☐ Schedule E/F,☐ Schedule G, lir  | line   |
| Nu<br>Cit                                      | umber Street<br>ty  | State   | ZIP Code  | — Scriedule 9, III  | ie   |
|  |   |   |   | Пол   |  |
| 3.2 Na   | ame   |   |   | <ul><li>☐ Schedule D, lir</li><li>☐ Schedule E/F,</li><li>☐ Schedule G, lir</li></ul> | line   |
| Nu   | umber Street  |   |   |   |  |
| Cit  |   | State   | ZIP Code  |   |  |

|     |   |   |                         |            |       | _                             |                           |                            |              |
|-----|---|---|-------------------------|------------|-------|-------------------------------|---------------------------|----------------------------|--------------|
|     | in this information to identify you   |   |                         |            |       |                               |                           |                            |              |
| De  | btor 1 Natalie A  | Тао   |                         |            |       |                               |                           |                            |              |
| 1 - | btor 2ouse, if filing)  |   |                         |            |       |                               |                           |                            |              |
| Un  | ited States Bankruptcy Court for  | the: DISTRICT OF MARY                                 | 'LAND                   |            |       |                               |                           |                            |              |
|     | se number<br>   |   | _                       |            |       |                               | nded filing<br>ement show | ring postpetition          |              |
| 0   | fficial Form 106l   |   |                         |            |       | MM / DI                       | D/ YYYY                   |                            |              |
| S   | chedule I: Your In  | come  |                         |            |       |                               |                           |                            | 12/15        |
| spo | plying correct information. If youse. If you are separated and you have a separated to this for the separate Sheet to this for the separate Sheet Employment. | your spouse is not filing wm. On the top of any addit | ith you, do not incl    | ude info   | rmat  | on about your<br>d case numbe | spouse. If<br>(if known)  | more space is              | needed,      |
|     | information.  |   |                         |            |       |                               | nployed                   | -ning spouse               |              |
|     | If you have more than one job<br>attach a separate page with<br>information about additional  | Employment status                                     | Employed  Mot employed  |            |       | ☐ Not employed                |                           |                            |              |
|     | employers.  | Occupation  | Self Employed-          | - 1099     |       |                               |                           |                            |              |
|     | Include part-time, seasonal, or self-employed work.   | Employer's name                                       |                         |            |       |                               |                           |                            |              |
|     | Occupation may include stude or homemaker, if it applies.   | nt Employer's address                                 |                         |            |       |                               |                           |                            |              |
|     |   | How long employed                                     | there?                  |            |       |                               |                           |                            |              |
| Pa  | rt 2: Give Details About I  | Monthly Income  |                         |            |       |                               |                           |                            |              |
|     | imate monthly income as of th<br>use unless you are separated.  | e date you file this form. If                         | f you have nothing to   | report fo  | r any | line, write \$0 in            | the space.                | Include your no            | on-filing    |
|     | ou or your non-filing spouse have<br>re space, attach a separate shee   |   | combine the information | on for all | emp   | loyers for that p             | erson on the              | e lines below. If          | f you need   |
|     |   |   |                         |            |       | For Debtor 1                  |                           | ebtor 2 or<br>iling spouse |              |
| 2.  | List monthly gross wages, s deductions). If not paid month  |   |                         | 2.         | \$    | 0.0                           | <u>0</u> \$               | N/A                        | -            |
| 3.  | Estimate and list monthly ov  | ertime pay.   |                         | 3.         | +\$   | 0.0                           | -\$_                      | N/A                        | <del>.</del> |
| 4.  | Calculate gross Income. Ad  | d line 2 + line 3.                                    |                         | 4.         | \$    | 0.00                          | \$                        | N/A                        |              |

Official Form 106l Schedule I: Your Income page 1

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| Debt | or 1<br>_ | Natalie A. Tao   | _            | Case     | e number ( <i>if known</i> ) |          |                  |        |
|------|-----------|--|--------------|----------|------------------------------|----------|------------------|--------|
|      |           |  |              |          |                              |          |                  |        |
|      |           |  |              | Fo       | r Debtor 1                   |          | tor 2 or         |        |
|      | Con       | y line 4 here  | 4.           | \$       | 0.00                         | \$       | ng spouse<br>N/A |        |
|      | Copy      | y lille 4 liele  | 4.           | Ψ_       | 0.00                         | Ψ        | N/A              |        |
| 5.   | List      | all payroll deductions:  |              |          |                              |          |                  |        |
|      | 5a.       | Tax, Medicare, and Social Security deductions  | 5a.          | \$       | 0.00                         | \$       | N/A              |        |
|      | 5b.       | Mandatory contributions for retirement plans   | 5b.          | \$       | 0.00                         | \$       | N/A              |        |
|      | 5c.       | Voluntary contributions for retirement plans   | 5c.          | \$       | 0.00                         | \$       | N/A              |        |
|      | 5d.       | Required repayments of retirement fund loans   | 5d.          | \$       | 0.00                         | \$       | N/A              |        |
|      | 5e.       | Insurance  | 5e.          | \$_      | 0.00                         | \$       | N/A              |        |
|      | 5f.       | Domestic support obligations   | 5f.          | \$_      | 0.00                         | \$       | N/A              |        |
|      | 5g.       | Union dues   | 5g.          | \$_      | 0.00                         | \$       | N/A              |        |
|      | 5h.       | Other deductions. Specify:   | 5h.+         | \$_      | 0.00                         | + \$     | N/A              |        |
| 6.   | Add       | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.           | \$_      | 0.00                         | \$       | N/A              |        |
| 7.   | Calc      | ulate total monthly take-home pay. Subtract line 6 from line 4.  | 7.           | \$_      | 0.00                         | \$       | N/A              |        |
| 8.   | List      | all other income regularly received:   |              |          |                              |          |                  |        |
|      | 8a.       | Net income from rental property and from operating a business,   |              |          |                              |          |                  |        |
|      |           | profession, or farm Attach a statement for each property and business showing gross  |              |          |                              |          |                  |        |
|      |           | receipts, ordinary and necessary business expenses, and the total  |              |          |                              |          |                  |        |
|      |           | monthly net income.  | 8a.          | \$       | 0.00                         | \$       | N/A              |        |
|      | 8b.       | Interest and dividends   | 8b.          | \$       | 0.00                         | \$       | N/A              |        |
|      | 8c.       | Family support payments that you, a non-filing spouse, or a dependent  | t            |          |                              |          |                  |        |
|      |           | regularly receive  |              |          |                              |          |                  |        |
|      |           | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 90           | \$       | 0.00                         | ¢        | NI/A             |        |
|      | 8d.       | Unemployment compensation  | 8c.<br>8d.   | \$<br>\$ | 0.00                         | \$       | N/A<br>N/A       |        |
|      | 8e.       | Social Security  | 8e.          | \$<br>\$ | 0.00                         | \$       | N/A              |        |
|      | 8f.       | Other government assistance that you regularly receive   | 06.          | Ψ_       | 0.00                         | Ψ        | IN/A             |        |
|      | Oi.       | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental     | е            |          |                              |          |                  |        |
|      |           | Nutrition Assistance Program) or housing subsidies.  |              | _        |                              | _        |                  |        |
|      | _         | Specify:   | 8f.          | \$_      | 0.00                         | \$       | N/A              |        |
|      | 8g.       | Pension or retirement income   | 8g.          | \$_      | 0.00                         | \$       | N/A              |        |
|      | 8h.       | Other monthly income. Specify: Pro rated tax refund  | 8h.+         |          | 200.00                       |          | N/A              |        |
|      |           | Rental Income  | _            | \$_      | 6,961.00                     | \$       | N/A              |        |
|      |           | Realtor Income   | _            | \$_      | 500.00                       | \$       | N/A              |        |
| 9.   | Add       | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.           | \$_      | 7,661.00                     | \$       | N/A              |        |
|      |           |  |              |          |                              |          |                  |        |
| 10.  |           | ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.                                      | 10.   \$     |          | 7,661.00 + \$_               | N        | /A = \$          | 661.00 |
| 4.4  |           | 5 1  | . <u>,</u> L |          |                              |          |                  |        |
| 11.  |           | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, you |              | dent     | s vour roommate              | e and    |                  |        |
|      |           | r friends or relatives.  | і асроп      | idoni    | o, your roommato             | o, and   |                  |        |
|      | Do n      | ot include any amounts already included in lines 2-10 or amounts that are not  | availab      | ole to   | pay expenses lis             |          |                  |        |
|      | Spec      | ify:   |              |          |                              |          | 11. +\$          | 0.00   |
| 12.  | Add       | the amount in the last column of line 10 to the amount in line 11. The re  | sult is tl   | he co    | ombined monthly i            | income.  |                  |        |
|      |           | e that amount on the Summary of Schedules and Statistical Summary of Certa   |              |          |                              | a. if it |                  | 664 00 |
|      | appli     | es   |              |          |                              | Í        | 12. \$           | 661.00 |
|      |           |  |              |          |                              |          | Combined         |        |
| 13.  | Dov       | ou expect an increase or decrease within the year after you file this form   | 12           |          |                              |          | monthly in       | come   |
| 13.  |           | No.  | • •          |          |                              |          |                  |        |
|      | _         | Ves Evolain:   |              |          |                              |          |                  |        |

Official Form 106l Schedule I: Your Income page 2

| <b></b> :11 | in thin informa                | tion to identify ye                | 21.15.00001   |   |                          | Ī                  |       |                    |  |        |
|-------------|--------------------------------|------------------------------------|---------------|---|--------------------------|--------------------|-------|--------------------|--|--------|
| FIII        | in this informa                | tion to identify yo                | our case:     |   |                          |                    |       |                    |  |        |
| Deb         | tor 1                          | Natalie A. Ta                      | 0             |   |                          | Check if this is:  |       |                    |  |        |
| Dah         | tor 2                          |                                    |               |   |                          |                    |       | n amended filing   |  |        |
|             | ouse, if filing)               |                                    |               |   |                          | -                  |       |                    | ving postpetition cha<br>the following date: | apter  |
| (-          |                                |                                    |               |   |                          |                    |       | ·                  |  |        |
| Unite       | ed States Bankru               | uptcy Court for the:               | DISTRI        | CT OF MARYLAND                                  |                          |                    | M     | M / DD / YYYY      |  |        |
| Case        | e number                       |                                    |               |   |                          |                    |       |                    |  |        |
| (If kr      | nown)                          |                                    |               |   |                          |                    |       |                    |  |        |
|             |                                |                                    |               |   |                          | ]                  |       |                    |  |        |
| Of          | ficial Fo                      | rm 106J                            |               |   |                          |                    |       |                    |  |        |
|             |                                | J: Your I                          | Evner         | 1808  |                          |                    |       |                    |  | 12/15  |
|             |                                |                                    |               |   | e are filing together, b | ooth are e         | nual  | lly responsible fo | or supplying corre                           |        |
| info        | rmation. If m                  |                                    | eded, atta    | ch another sheet to t                           | his form. On the top o   |                    |       |                    |  |        |
| Par         | 1: Descr                       | ibe Your House                     | hold          |   |                          |                    |       |                    |  |        |
| 1.          | Is this a join                 |                                    |               |   |                          |                    |       |                    |  |        |
|             | ■ No. Go to                    | line 2.                            |               |   |                          |                    |       |                    |  |        |
|             | ☐ Yes. Doe                     | s Debtor 2 live i                  | in a separ    | ate household?                                  |                          |                    |       |                    |  |        |
|             | □ No                           | 0                                  |               |   |                          |                    |       |                    |  |        |
|             | □ Ye                           | es. Debtor 2 mus                   | st file Offic | al Form 106J-2, <i>Exper</i>                    | nses for Separate Hous   | ehold of D         | Debto | or 2.              |  |        |
| 2.          | Do you have                    | e dependents?                      | □ No          |   |                          |                    |       |                    |  |        |
| ۷.          | •                              | •                                  | □ NO          | Fill and this information for                   | Daman danida nalad       |                    |       | Dan an dan da      | D ddt  |        |
|             | Do not list De and Debtor 2    |                                    | Yes.          | Fill out this information for<br>each dependent |                          |                    |       | Dependent's age    | Does dependent live with you?                |        |
|             | Do not state                   | tha                                |               |   |                          |                    |       |                    | □ No   |        |
|             | dependents i                   |                                    |               |   | Son                      |                    |       | 19                 | ■ Yes  |        |
|             | ·                              |                                    |               |   |                          |                    |       |                    | □ No   |        |
|             |                                |                                    |               |   |                          |                    |       |                    | ☐ Yes  |        |
|             |                                |                                    |               |   |                          |                    |       |                    | □ No   |        |
|             |                                |                                    |               |   |                          |                    |       |                    | ☐ Yes  |        |
|             |                                |                                    |               |   |                          |                    |       |                    | □ No   |        |
| 3.          | De veur eve                    | anaaa inaliida                     | _             |   |                          |                    |       |                    | ☐ Yes  |        |
| Э.          |                                | enses include<br>f people other tl | han           | No  |                          |                    |       |                    |  |        |
|             |                                | d your depender                    |               | Yes   |                          |                    |       |                    |  |        |
| Par         | f 2: Estima                    | ate Your Ongoi                     | na Month      | v Fynenses                                      |                          |                    |       |                    |  |        |
|             |                                |                                    |               |   | ss you are using this f  | form as a          | sup   | plement in a Cha   | apter 13 case to rep                         | port   |
|             | enses as of a<br>licable date. | date after the b                   | oankruptc     | y is filed. If this is a s                      | supplemental Schedul     | e <i>J</i> , checl | k the | box at the top o   | of the form and fill                         | in the |
|             |                                |                                    |               | government assistan                             |                          |                    |       |                    |  |        |
|             |                                |                                    | d have inc    | cluded it on Schedule                           | e I: Your Income         |                    |       | Your expe          | enses  |        |
| (On         | ficial Form 10                 | 101.)                              |               |   |                          |                    | -     | Tour expe          |  |        |
| 4.          | The rental o                   | r home owners                      | hin exnen     | ses for your residence                          | e. Include first mortgag | 16                 |       |                    |  |        |
| ••          |                                | nd any rent for the                |               |   | or morade mor morigag    | 4.                 | \$    |                    | 1,000.00                                     |        |
|             | If not includ                  | led in line 4:                     |               |   |                          |                    |       |                    |  |        |
|             | 4a. Real e                     | state taxes                        |               |   |                          | 4a.                | \$    |                    | 500.00                                       |        |
|             |                                | rty, homeowner's                   | s, or renter  | 's insurance                                    |                          | 4b.                |       |                    | 0.00   |        |
|             | 4c. Home                       | maintenance, re                    | pair, and ι   | ıpkeep expenses                                 |                          | 4c.                | \$    |                    | 400.00                                       |        |
| _           |                                | owner's associat                   |               |   |                          | 4d.                |       |                    | 0.00   |        |
| 5.          | Additional n                   | nortgage payme                     | ents for yo   | our residence, such as                          | s home equity loans      | 5.                 | \$    |                    | 0.00   |        |

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| ebtor 1 Natalie A  | A. Tao  | Case num           | ber (if known) |                             |
|--|---|--------------------|----------------|-----------------------------|
| 114:11:4:  |   |                    |                |                             |
| <ul> <li>Utilities:</li> <li>6a. Electricity.</li> </ul> | heat, natural gas   | 6a.                | \$             | 354.00                      |
| •  | wer, garbage collection   | 6b.                |                | 200.00                      |
|  | e, cell phone, Internet, satellite, and cable services                      | 6c.                |                |                             |
|  |   |                    | ·              | 385.00                      |
| 6d. Other. Spe   |   | 6d.                | ·              | 0.00                        |
|  | ekeeping supplies   |                    | \$             | 600.00                      |
|  | hildren's education costs   | 8.                 | ·              | 500.00                      |
| Clothing, laund  | ry, and dry cleaning  | 9.                 | \$             | 250.00                      |
| Personal care p  | roducts and services  | 10.                | \$             | 250.00                      |
| Medical and de   | •   | 11.                | \$             | 100.00                      |
|  | Include gas, maintenance, bus or train fare.                                | 12.                | ¢              | 700.00                      |
| Do not include co  |   |                    |                |                             |
|  | clubs, recreation, newspapers, magazines, and books                         | 13.                |                | 0.00                        |
|  | ributions and religious donations   | 14.                | \$             | 0.00                        |
| Insurance.   |   |                    |                |                             |
|  | surance deducted from your pay or included in lines 4 or 20.                |                    | •              | <u> </u>                    |
| 15a. Life insura   |   | 15a.               | ·              | 0.00                        |
| 15b. Health ins  | urance  | 15b.               | *              | 0.00                        |
| 15c. Vehicle in:   | surance   | 15c.               | \$             | 220.00                      |
| 15d. Other insu  | rance. Specify:   | 15d.               | \$             | 0.00                        |
|  | clude taxes deducted from your pay or included in lines 4 or 20             |                    |                |                             |
| Specify:   | , , ,   | 16.                | \$             | 0.00                        |
| Installment or le  |   |                    |                |                             |
|  | ents for Vehicle 1  | 17a.               | ·              | 0.00                        |
| 17b. Car payme   | ents for Vehicle 2  | 17b.               | \$             | 0.00                        |
| 17c. Other. Spe  | ecify:  | 17c.               | \$             | 0.00                        |
| 17d. Other. Spe  | ecify:  | 17d.               | \$             | 0.00                        |
|  | of alimony, maintenance, and support that you did not rep                   |                    |                | 0.00                        |
|  | your pay on line 5, Schedule I, Your Income (Official Form                  | <b>106I).</b> 18.  |                | 0.00                        |
|  | s you make to support others who do not live with you.                      |                    | \$             | 0.00                        |
| Specify:   |   | 19.                |                |                             |
|  | erty expenses not included in lines 4 or 5 of this form or or               |                    |                |                             |
| 20a. Mortgages   | s on other property   | 20a.               | ·              | 0.00                        |
| 20b. Real estat  | e taxes   | 20b.               | \$             | 0.00                        |
| 20c. Property, I   | nomeowner's, or renter's insurance  | 20c.               | \$             | 0.00                        |
| 20d. Maintenar   | ce, repair, and upkeep expenses   | 20d.               | \$             | 1,202.00                    |
|  | er's association or condominium dues  | 20e.               | \$             | 0.00                        |
|  | Home Maintenance Warranty Expense   |                    | +\$            | 200.00                      |
|  |   |                    | . Ψ            | 200.00                      |
|  | monthly expenses  |                    |                |                             |
| 22a. Add lines 4   | S .   |                    | \$             | 6,861.00                    |
| 22b. Copy line 2   | 2 (monthly expenses for Debtor 2), if any, from Official Form 10            | )6J-2              | \$             |                             |
| 22c. Add line 22   | a and 22b. The result is your monthly expenses.                             |                    | \$             | 6,861.00                    |
|  |   |                    |                | 3,0003                      |
| •  | monthly net income.   |                    | •              |                             |
|  | 12 (your combined monthly income) from Schedule I.                          | 23a.               |                | 7,661.00                    |
| 23b. Copy your   | monthly expenses from line 22c above.                                       | 23b.               | -\$            | 6,861.00                    |
| 000 0  | our monthly ovnences from your monthly in come                              |                    |                |                             |
|  | our monthly expenses from your monthly income.                              | 23c.               | \$             | 800.00                      |
| rne result   | is your monthly net income.   | 200.               |                |                             |
| 1. Do vou expect a                                       | an increase or decrease in your expenses within the year a                  | fter vou file this | s form?        |                             |
|  | u expect to finish paying for your car loan within the year or do you expec |                    |                | se or decrease because of a |
|  | terms of your mortgage?   | ,                  | ,              |                             |
| ■ No.  |   |                    |                |                             |
| ☐ Yes.   | Explain here:   |                    |                |                             |
| <b>□</b> 1 €5.   | Explain note.   |                    |                |                             |

| Fill in this inform                | nation to identify your   | case:                         |        |                               |                                      |  |  |  |  |
|------------------------------------|---|-------------------------------|--------|-------------------------------|--------------------------------------|--|--|--|--|
| Debtor 1                           | Natalie A. Tao  |                               |        |                               |                                      |  |  |  |  |
| Dobtor 2                           | First Name  | Middle Name                   | Las    | st Name                       |                                      |  |  |  |  |
| Debtor 2<br>(Spouse if, filing)    | First Name  | Middle Name                   | Las    | st Name                       |                                      |  |  |  |  |
| United States Ban                  | nkruptcy Court for the:   | DISTRICT OF MARYLAND          |        |                               |                                      |  |  |  |  |
| Case number(if known)              |   |                               |        |                               | ☐ Check if this is an amended filing |  |  |  |  |
| Official Form                      |   | n Individual De               | bto    | or's Schedules                | 12/15                                |  |  |  |  |
| years, or both. 18                 | You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or ibtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below |                               |        |                               |                                      |  |  |  |  |
| Did you pay                        | or agree to pay some  | one who is NOT an attorney to | o help | you fill out bankruptcy forms | ?                                    |  |  |  |  |
| ■ No<br>□ Yes. Na                  |   |                               |        |                               |                                      |  |  |  |  |
|                                    | Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  |                               |        |                               |                                      |  |  |  |  |
| X /s/ Nata<br>Natalie<br>Signature |   |                               | X      | Signature of Debtor 2         |                                      |  |  |  |  |
| Date <u>J</u>                      | une 26, 2019  |                               |        | Date                          |                                      |  |  |  |  |

Official Form 106Dec

|                   |   | nation to identify you                     | r case:  |   |  |   |
|-------------------|---|--|--|---|--|---|
| Del               | btor 1  | Natalie A. Tao First Name                  | Middle Name  | Last Name   |  |   |
| 1 -               | btor 2  |  |  |   |  |   |
| (Spo              | ouse if, filing)                              | First Name                                 | Middle Name  | Last Name   |  |   |
| Uni               | ited States Ba                                | nkruptcy Court for the:                    | DISTRICT OF MARYLAN  | ID  |  |   |
| 1                 | se number _                                   |  |  |   | _  | heck if this is an                                    |
| St                | as complete a                                 | of Financial                               |  | are filing together, both are                         | ankruptcy<br>equally responsible for sup<br>y additional pages, write yo |   |
|                   |   | n). Answer every que                       |  | this form. On the top of an                           | y additional pages, write yo   | ur name and case                                      |
| Pai               | rt 1: Give I                                  | Details About Your Ma                      | arital Status and Where You  | ı Lived Before  |  |   |
| 1.                | What is you                                   | r current marital statu                    | ıs?  |   |  |   |
|                   | <ul><li>□ Married</li><li>■ Not mar</li></ul> |  |  |   |  |   |
| 2.                | During the I                                  | ast 3 years, have you                      | lived anywhere other than  | where you live now?                                   |  |   |
|                   | ■ No<br>□ Yes. Lis                            | et all of the places you                   | lived in the last 3 years. Do n  | ot include where you live nov                         | ν.   |   |
|                   | Debtor 1 Pr                                   | ior Address:                               | Dates Debtor 1 lived there   | Debtor 2 Prior Ad                                     | dress:   | Dates Debtor 2<br>lived there                         |
| <b>3.</b><br>stat |   |  |  |   | nity property state or territor<br>ico, Texas, Washington and V          |   |
|                   | ■ No<br>□ Yes. Ma                             | ake sure you fill out <i>Sci</i>           | hedule H: Your Codebtors (O  | fficial Form 106H).                                   |  |   |
| Pai               | rt 2 Explai                                   | in the Sources of You                      | r Income   |   |  |   |
| 4.                | Fill in the tota                              | al amount of income yo                     | nployment or from operatir<br>ou received from all jobs and<br>have income that you receiv | all businesses, including par                         |  | ndar years?   |
|                   | □ No ■ Yes. Fil                               | I in the details.                          |  |   |  |   |
|                   |   |  | Debtor 1   |   | Debtor 2   |   |
|                   |   |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                               | Gross income<br>(before deductions<br>and exclusions) |
|                   |   | of current year until<br>d for bankruptcy: | ☐ Wages, commissions, bonuses, tips  | \$42,966.00   | ☐ Wages, commissions, bonuses, tips                                      |   |
|                   |   |  | Operating a business   |   | ☐ Operating a business   |   |

Official Form 107

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| Debtor 1  | Natalle A. Ta   | 10  |  |   | e Hullibel (# khowh)   |  |   |
|---|---|---|--|---|--|--|---|
|   |   |   |  |   |  |  |   |
|   |   |   | Debtor 1   |   | Debtor 2   |  |   |
|   |   |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)   | Sources of inc<br>Check all that a   |  | Gross income<br>(before deductions<br>and exclusions) |
| For last calendar year:<br>(January 1 to December 31, 2018) |   | ☐ Wages, commissions, bonuses, tips   |  |   | ☐ Wages, commissions, bonuses, tips  |  |   |
|   |   |   | Operating a business   |   | ☐ Operating a  | business                                     |   |
|   | alendar year be<br>1 to December  |   | ☐ Wages, commissions, bonuses, tips  | \$0.00  | ☐ Wages, combonuses, tips  | missions,                                    |   |
|   |   |   | Operating a business   |   | Operating a  | business                                     |   |
| List ea   | ,   | he gross inco   | u are filing a joint case and yo   | •   | •  | •  | G. Idol Doblot 1.                                     |
|   |   |   |  |   |  |  |   |
|   |   |   | Debtor 1 Sources of income Describe below.   | Gross income from each source (before deductions and exclusions)  | Debtor 2<br>Sources of inc<br>Describe below   |  | Gross income<br>(before deductions<br>and exclusions) |
| Part 3:   | List Certain Pa   | yments You  | Made Before You Filed for  | Bankruptcy  |  |  |   |
| <u> </u>  | No. Neither Deindividual puring the No. No. No. Neither Deindividual puring the No. | pettor 1 nor D<br>primarily for a<br>90 days befo<br>Go to line 7<br>List below e<br>paid that cre<br>not include<br>to adjustment<br>or Debtor 2 o<br>90 days befo | ach creditor to whom you pai<br>editor. Do not include paymer<br>payments to an attorney for the<br>on 4/01/22 and every 3 year<br>r both have primarily consumer<br>re you filed for bankruptcy, di | Imer debts. Consumer debtld purpose."  d you pay any creditor a total d a total of \$6,825* or more ats for domestic support oblinis bankruptcy case. s after that for cases filed or imer debts.  d you pay any creditor a total | al of \$6,825* or moin one or more pargations, such as class or after the date of \$600 or more? | ore?  yments and the support of adjustments? | the total amount you<br>and alimony. Also, do<br>at.  |
|   | □ <sub>Yes</sub>  | include pay   | ach creditor to whom you pai<br>ments for domestic support o<br>for this bankruptcy case.  |   |  |  |   |
| Cred  | litor's Name and  | d Address   | Dates of payme   | nt Total amount paid  | Amount you still owe   | Was this p                                   | payment for   |
|   |   |   |  |   |  |  |   |

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Case number (if known)

| 7. | Within 1 year before you filed for bankrupt<br>Insiders include your relatives; any general path corporations of which you are an officer, direct including one for a business you operate as a support and alimony. | artners; relatives of any ger<br>ctor, person in control, or ov | eral partners; partners partners | erships of which your of their voting sec | ou are a general partner;<br>curities; and any managing age   |       |
|----|--|---|----------------------------------|---|---|-------|
|    | ■ No   |   |                                  |   |   |       |
|    | Yes. List all payments to an insider.  |   |                                  |   |   |       |
|    | Insider's Name and Address   | Dates of payment  | Total amount paid                | Amount you still owe                      | Reason for this payment   |       |
| 8. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost  |   | ments or transfer a              | any property on a                         | ccount of a debt that benefite  | ed ar |
|    | <ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>  |   |                                  |   |   |       |
|    | Insider's Name and Address   | Dates of payment  | Total amount paid                | Amount you still owe                      | Reason for this payment Include creditor's name   |       |
| Pa | rt 4: Identify Legal Actions, Repossession   | ns, and Foreclosures  |                                  |   |   |       |
| 9. | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.   No  |   |                                  |   |   |       |
|    | Yes. Fill in the details.  |   |                                  |   |   |       |
|    |  |   |                                  |   |   |       |
|    | Case title Case number   | Nature of the case  | Court or agency                  |   | Status of the case  |       |
|    |  | Nature of the case  Bankruptcy Chapter 13                       | Court or agency  MARYLAND - E    | BALTIMORE                                 | Status of the case  Pending On appeal Concluded   |       |
|    | Case number NATALIE MORGAN TAO   | Bankruptcy  |                                  | BALTIMORE                                 | ☐ Pending ☐ On appeal   |       |
|    | Case number NATALIE MORGAN TAO   | Bankruptcy  |                                  |   | ☐ Pending ☐ On appeal ☐ Concluded   |       |
|    | Case number NATALIE MORGAN TAO 1313812  NATALIE MORGAN TAO   | Bankruptcy<br>Chapter 13  | MARYLAND - E                     |   | Pending On appeal Concluded Discharged - 0.00 Pending On appeal   |       |
|    | Case number NATALIE MORGAN TAO 1313812  NATALIE MORGAN TAO   | Bankruptcy<br>Chapter 13  | MARYLAND - E                     | BALTIMORE                                 | Pending On appeal Concluded  Discharged - 0.00  Pending On appeal Concluded   |       |
|    | NATALIE MORGAN TAO 1313812  NATALIE MORGAN TAO 1221747  NATALIE MORGANTAO  | Bankruptcy<br>Chapter 13  Bankruptcy<br>Chapter 13              | MARYLAND - E                     | BALTIMORE                                 | Pending On appeal Concluded  Discharged - 0.00  Pending On appeal Concluded  Dismissed - 0.00  Pending On appeal On appeal                                  |       |
|    | NATALIE MORGAN TAO 1313812  NATALIE MORGAN TAO 1221747  NATALIE MORGANTAO  | Bankruptcy<br>Chapter 13  Bankruptcy<br>Chapter 13              | MARYLAND - E                     | BALTIMORE                                 | Pending On appeal Concluded  Discharged - 0.00  Pending On appeal Concluded  Dismissed - 0.00  Pending On appeal Concluded  Concluded  Concluded  Concluded |       |

Debtor 1 Natalie A. Tao

Debtor 1 Natalie A. Tao

Case number (if known)

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Case number (if known)

|     | Case title Case number  | Nature of the case                                   | Court or agency                | Status of the case            |                      |
|-----|---|--|--------------------------------|-------------------------------|----------------------|
|     | DISTRICT COURT FOR<br>BALTIMORE CITY - CIVIL SYSTEM<br>Case Number:<br>010100310262018  | (TAO, NATALIE)<br>Vs:(LIBERTY<br>MUTUAL INS<br>COMP) |                                | ☐ Pending ☐ On appe ☐ Conclud | eal                  |
|     | Claim Type: TORT  |  |                                |                               |                      |
|     | Filing Date: 12/21/2018   |  |                                |                               |                      |
|     | Case Status: ACTIVE   |  |                                |                               |                      |
|     | DISTRICT COURT FOR<br>BALTIMORE CITY - CIVIL SYSTEM<br>Case Number: 010100310252018<br>Claim Type: TORT   | TAO, NATALIE Vs.<br>WILLIAMS,<br>DWAYNE, et al       |                                | ■ Pending □ On appe           | eal                  |
|     | Filing Date: 12/21/2018   |  |                                |                               |                      |
|     | Case Status:ACTIVE  |  |                                |                               |                      |
| 10. | Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  ■ No. Go to line 11.  □ Yes. Fill in the information below.  Creditor Name and Address |  | erty repossessed, foreclosed   | I, garnished, attache         | Value of the         |
|     |   | Explain what happened                                | i                              |                               | property             |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment becar No  Yes. Fill in the details.  |  | luding a bank or financial in  | stitution, set off any        | amounts from your    |
|     | Creditor Name and Address   | Describe the action the                              | creditor took                  | Date action was taken         | Amount               |
|     | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a  |  | erty in the possession of an   | assignee for the ben          | efit of creditors, a |
|     | ■ No<br>□ Yes   |  |                                |                               |                      |
| Par | 5: List Certain Gifts and Contributions   |  |                                |                               |                      |
| 13. | Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.   | tcy, did you give any gift                           | s with a total value of more t | han \$600 per persor          | ?                    |
|     | Gifts with a total value of more than \$600 per person  | Describe the gifts                                   |                                | Dates you gave the gifts      | Value                |
|     | Person to Whom You Gave the Gift and Address:   |  |                                |                               |                      |
|     |   |  |                                |                               |                      |

Debtor 1 Natalie A. Tao

Case number (if known)

| 4.  | Within 2 years before you filed for bankru  No  |                 |   | ons with a t | otal value of more than                     | \$600 to any charity?  |  |  |  |
|-----|---|-----------------|---|--------------|---|------------------------|--|--|--|
|     | Yes. Fill in the details for each gift or confidence of the details |                 | tion.  Describe what you contributed                              |              | Dates you                                   | Value                  |  |  |  |
|     | more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)   |                 | besonde what you communica  |              | contributed                                 | Vuide                  |  |  |  |
| Pai | t 6: List Certain Losses  |                 |   |              |   |                        |  |  |  |
| 15. | Within 1 year before you filed for bankru<br>disaster, or gambling?   | ptcy or         | since you filed for bankruptcy, did                               | you lose a   | nything because of the                      | ft, fire, other        |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |                 |   |              |   |                        |  |  |  |
|     | how the loss occurred   |                 | ibe any insurance coverage for the                                |              | Date of your loss                           | Value of property lost |  |  |  |
|     | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.   |                 |   |              |   |                        |  |  |  |
| Pai | t 7: List Certain Payments or Transfers   | 3               |   |              |   |                        |  |  |  |
| 6.  | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.   |                 |   |              |   |                        |  |  |  |
|     | □ No  |                 |   |              |   |                        |  |  |  |
|     | Yes. Fill in the details.  Person Who Was Paid  |                 | Description and value of any prop                                 | nerty        | Date payment                                | Amount of              |  |  |  |
|     | Address Email or website address Person Who Made the Payment, if Not You  |                 | transferred   |              | or transfer was<br>made                     | payment                |  |  |  |
|     | Jeffrey M. Sirody and Associates<br>1777 Reisterstown Road<br>Suite 360 East<br>Pikesville, MD 21208<br>smeyers5@hotmail.com  |                 | Attorney Fees   |              |   | \$0.00                 |  |  |  |
|     |   |                 |   |              |   |                        |  |  |  |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that   | litors o        | or to make payments to your credito                               |              | y or transfer any prope                     | rty to anyone who      |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |                 |   |              |   |                        |  |  |  |
|     | Person Who Was Paid   |                 | Description and value of any prop                                 | perty        | Date payment                                | Amount of              |  |  |  |
|     | Address   |                 | transferred   |              | or transfer was made                        | payment                |  |  |  |
| 18. | Within 2 years before you filed for bankru transferred in the ordinary course of you include both outright transfers and transfers that you have already  | r busir<br>made | ness or financial affairs? as security (such as the granting of a |              |   |                        |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |                 |   |              |   |                        |  |  |  |
|     | Person Who Received Transfer Address  |                 | Description and value of property transferred                     |              | ne any property or<br>nts received or debts | Date transfer was made |  |  |  |
|     | Person's relationship to you  |                 |   | paid in      | exchange                                    |                        |  |  |  |
|     |   |                 |   |              |   |                        |  |  |  |

Debtor 1 Natalie A. Tao

Debtor 1 Natalie A. Tao Case number (if known)

| 19. |  | years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a ry? (These are often called asset-protection devices.)  Fill in the details. |                 |             |  |   |
|-----|--|--|-----------------|-------------|--|---|
|     | Name of trust  | Description and v  | alue of the pro | operty tran | sferred  | Date Transfer was made                        |
| Par | 8: List of Certain Financial Accounts, Instr   | ruments, Safe Deposi   | t Boxes, and S  | storage Un  | its  | muuc  |
| 20. | Within 1 year before you filed for bankruptcy,   | were any financial ac  | counts or inst  | ruments h   | eld in your name, or for                             | your benefit, closed,                         |
|     | sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa  No  |  |                 |             | sit; shares in banks, cred                           | dit unions, brokerage                         |
|     | Yes. Fill in the details.  |  |                 |             |  |   |
|     |  | ast 4 digits of account number   | Type of acco    | ount or     | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?   |  |                 |             |  |   |
|     | No   |  |                 |             |  |   |
|     | Yes. Fill in the details.  Name of Financial Institution   | Who else had acc   | ess to it?      | Describe    | the contents   | Do you still                                  |
|     | Address (Number, Street, City, State and ZIP Code)   | Address (Number, State and ZIP Code)   |                 |             |  | have it?                                      |
| 22. | Have you stored property in a storage unit or  No  | place other than your  | home within     | 1 year befo | ore you filed for bankrup                            | tcy?  |
|     | Yes. Fill in the details.  Name of Storage Facility  | Who else has or h  | nad access      | Describe    | the contents   | Do you still                                  |
|     | Address (Number, Street, City, State and ZIP Code)   | to it? Address (Number, S State and ZIP Code)  |                 | Dogorijo    |  | have it?                                      |
| Par | 9: Identify Property You Hold or Control fo  | or Someone Else  |                 |             |  |   |
| 23. | Do you hold or control any property that some for someone.   | eone else owns? Incl   | ude any prope   | rty you bo  | rrowed from, are storing                             | for, or hold in trust                         |
|     | ■ No □ Yes. Fill in the details.   |  |                 |             |  |   |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the prop<br>(Number, Street, City, S<br>Code)   |                 | Describe    | the property   | Value   |
| Par | 10: Give Details About Environmental Inform  | mation   |                 |             |  |   |
| For | he purpose of Part 10, the following definition  | ns apply:  |                 |             |  |   |
|     | Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s   | air, land, soil, surfac  | e water, groun  |             |  |   |
|     | Site means any location, facility, or property a to own, operate, or utilize it, including dispos  | _  | environmental   | law, whet   | her you now own, opera                               | te, or utilize it or used                     |
|     | Hazardous material means anything an environment of the material means anything an environment of the material | onmental law defines   | as a hazardou   | s waste, h  | azardous substance, to                               | cic substance,                                |
| Ren | ort all notices, releases, and proceedings that  | vou know about, rega   | ardless of whe  | n they occ  | curred.  |   |

Debtor 1 Natalie A. Tao Case number (if known)

| 24. | Has<br>■<br>□   | any governmental unit notified you that  No  Yes. Fill in the details. | you may be liable or potentially liab                                   | ole und | der or in vio           | lation of an environme  | ental law?         |
|-----|---|--|---|---------|-------------------------|-------------------------|--------------------|
|     | Na  | me of site dress (Number, Street, City, State and ZIP Code)            | Governmental unit Address (Number, Street, City, State a ZIP Code)      | and     | Environme<br>know it    | ntal law, if you        | Date of notice     |
| 25. | Hav   | e you notified any governmental unit of                                | any release of hazardous material?                                      |         |                         |                         |                    |
|     |   | Yes. Fill in the details.  |   |         |                         |                         |                    |
|     |   | me of site<br>dress (Number, Street, City, State and ZIP Code)         | Governmental unit Address (Number, Street, City, State a ZIP Code)      | and     | Environme know it       | ntal law, if you        | Date of notice     |
| 26. | Hav   | e you been a party in any judicial or adm                              | ninistrative proceeding under any er                                    | nvironi | mental law?             | Include settlements a   | and orders.        |
|     |   | No<br>Yes. Fill in the details.  |   |         |                         |                         |                    |
|     |   | se Title<br>se Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat     | ture of the c           | ase                     | Status of the case |
| Par | 11:   | Give Details About Your Business or 0                                  | Connections to Any Business   |         |                         |                         |                    |
| 27. | <del></del> -   |  |   |         |                         |                         |                    |
|     | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time |  |   |         |                         |                         |                    |
|     |   | _  |   |         |                         | or part-time            |                    |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  |  |   |         |                         |                         |                    |
|     |   | A partner in a partnership   |   |         |                         |                         |                    |
|     | <ul><li>☐ An officer, director, or managing executive of a corporation</li><li>☐ An owner of at least 5% of the voting or equity securities of a corporation</li></ul>  |  |   |         |                         |                         |                    |
|     |   |  |   | 711     |                         |                         |                    |
|     | _   | No. None of the above applies. Go to F                                 |   |         |                         |                         |                    |
|     | Ru  | Yes. Check all that apply above and fill siness Name                   | Describe the nature of the business                                     |         | Employer                | Identification number   |                    |
|     | Ad  | dress  |   |         |                         | clude Social Security n | umber or ITIN.     |
|     | (Number, Street, City, State and ZIP Code)  |  | Name of accountant or bookkeeper  Dates business existed                |         | siness existed          |                         |                    |
|     | King & Queen, LLC<br>877 N. Howard St.  |  | Real estate holding co., dissolved                                      |         | EIN:                    |                         |                    |
|     |   | Itimore, MD 21201  |   |         | From-To                 | 8/15/2007 to 9/11/17    | 7                  |
|     |   | ality Care Daycare at BUP, LLP   | daycare, dissolved  |         | EIN:                    |                         |                    |
|     |   | 7 N. Howard St.<br>Itimore, MD 21201                                   |   |         | From-To                 | 5/8/2002 to 10/2016     |                    |
|     |   | 5 East 17th Street, LLC  | Real estate   |         | EIN:                    | 113537669               |                    |
|     |   | 5 Third Ave., 29th FLoor<br>w York, NY 10017                           |   |         | From-To                 | 2009 to present         |                    |
|     | 2500 Bedford Ave., LLC<br>102 Betsy Rawls Dr.<br>Middletown, DE 19709   |  | Real estate   |         | EIN:                    | 113537677               |                    |
|     |   |  |   |         | From-To 2009 to present |                         |                    |
|     |   | East 21st St., LLC   | Real Estate   |         | EIN:                    | 133581405               |                    |
|     | 655 Third Ave., 29th FIr.<br>New York, NY 10017   |  |   |         | From-To                 | 2009 to present         |                    |

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| Del                 | otor 1 Natalie A. Tao  |   | Case number (i  | if known)   |
|---------------------|--|---|-----------------|---|
|                     |  |   |                 |   |
|                     | Business Name<br>Address<br>(Number, Street, City, State and ZIP Code)   | Describe the nature of the business  Name of accountant or bookkeeper | Do not in       | Identification number clude Social Security number or ITIN. |
|                     | Natalie Tao/Self Employed Realtor<br>877 N. Howard St.   | Realtor   | EIN:            |   |
|                     | Baltimore, MD 21201  | self  | From-To         | 2010 to present   |
| 28.                 | Within 2 years before you filed for bankrup institutions, creditors, or other parties.  ■ No □ Yes. Fill in the details below.   | ptcy, did you give a financial statement to                           | o anyone abou   | t your business? Include all financial                      |
|                     | Name<br>Address<br>(Number, Street, City, State and ZIP Code)  | Date Issued   |                 |   |
| Par                 | t 12: Sign Below   |   |                 |   |
| are<br>with<br>18 U | ve read the answers on this Statement of F true and correct. I understand that making a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.  Natalie A. Tao | a false statement, concealing property, o                             | r obtaining m   | oney or property by fraud in connection                     |
|                     | talie A. Tao<br>nature of Debtor 1   | Signature of Debtor 2   |                 |   |
| Dat                 | e June 26, 2019  | Date  |                 |   |
| Did<br>■ N          | ••   | nent of Financial Affairs for Individuals Fl                          | iling for Bankr | ruptcy (Official Form 107)?                                 |
| Did<br>■ N          | you pay or agree to pay someone who is n   | ot an attorney to help you fill out bankrup                           | otcy forms?     |   |
|                     | **   | ruptcy Petition Preparer's Notice, Declaratio                         | n, and Signatu  | re (Official Form 119).                                     |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |  |
|------------|--------------------|--|
| \$245      | filing fee         |  |
| \$75       | administrative fee |  |
| + \$15     | trustee surcharge  |  |
| \$335      | total fee          |  |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court District of Maryland

|    |                                | 2 1801 100 01 11 101 3 101 101                        |                   |                      |
|----|--------------------------------|---|-------------------|----------------------|
| re | Natalie A. Tao                 | Dilector  | Case No.          | 42                   |
|    |                                | Debtor(s)   | Chapter           | 13                   |
|    |                                |   |                   |                      |
|    | VE                             | RIFICATION OF CREDITOR N                              | MATRIX            |                      |
|    |                                |   |                   |                      |
| h  | ove-named Debtor hereby verifi | es that the attached list of creditors is true and co | rrect to the hest | of his/her knowledge |
|    | e named Bestor neresy verm     | is the uncored his or elections is true and ec        | ricer to the best | or marner miowieage. |
| ): | June 26, 2019                  | /s/ Natalie A. Tao                                    |                   |                      |
|    |                                | Natalie A. Tao  |                   |                      |

Signature of Debtor

Andrew Gary 2450 Eutaw Pl. Baltimore, MD 21217

Brandon Lee Jackson 11800 Elderberry Dr. Capitol Heights, MD 20743

City of Baltimore 200 N. Holliday Street Rm. 1, Attn: Bankruptcy Baltimore, MD 21202

Comptroller of Maryland Revenue Admins Division 110 Carroll St. Annapolis, MD 21411

Credit Service Company Attn: Bankruptcy Po Box 1120 Colorado Springs, CO 80901

EZPass PO Box 5100 Baltimore, MD 21224

FNA DZ, LLC FBO WSFS c/o James Truitt 20 E. Timonium Rd., # 101 Lutherville Timonium, MD 21093

Freeman and Sons 5808 Folgate Ct Capitol Heights, MD 20743

Huesman, Jones and Miles Executive Plaza III, Suite 300 11350 McCormick Road Hunt Valley, MD 21031

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 Internal Revenue Service 31 Hopkins Plaza Room 1150 Baltimore, MD 21201

Lakeside National LLC 1 N. Marlyn Ave. Essex, MD 21221

Lakeside National, LLC 54 Windemere Parkway Phoenix, MD 21131

MD PLC, LLC 11 Warren Rd. Cockeysville, MD 21030

MDCVA Properties LLC 35 Fulford Avenue, Suite 203 Bel Air, MD 21014

MVA 6601 Ritchie Hwy NE Glen Burnie, MD 21062

PBS Investments, LLC 3909 Sweetbriar Lane Frederick, MD 21704

Precision Contracting & Dev. Corp 800 McKean Ave.
Baltimore, MD 21217

State of Maryland Comptroller of the Treasury 301 W. Preston Street, Room 410 Baltimore, MD 21201

State of Maryland Central Collection Unit 300 W. Preston St., Rm. 407 Baltimore, MD 21201 Tax Properties One, LLC c/o Pessin Katz Law, PA 901 Dulaney Valley Rd., Ste. 500 Towson, MD 21204

Transworld Sys Inc/33 Attn: Compliance Dept Po Box 15618 Wilmington, DE 19850

Valda Morgan 1062 E 43rd st. Brooklyn, NY 11210